2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002777

Entity Name: TITAN BOOSTER INC.

Current Principal Place of Business:

760 AZALEA COURT PLANTATION. FL 33317

Current Mailing Address:

P.O. BOX 290212

DAVIE. FL 33329-0212 US

FEI Number: 45-5291264 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'HARA, KATHLEEN 760 AZALEA COURT PLANTATION, FL 33317 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 11, 2018

Secretary of State

CC3269249930

Officer/Director Detail:

Title D Title DIRECTOR

Name STEVENSON, BONNIE Name CLARK-MC CLENDON, BVONNE PH,D

Address 8250 NW 11 ST Address 16469 NW 12 ST.

City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33028

Title P Title T

NameO'HARA, KATHLEENNameWOLFE, MARIAAddress760 AZALEA COURTAddress1130 SE 9TH AVE

City-State-Zip: DPLANTATION FL 33317 City-State-Zip: POMPANO BEACH FL 33060

Title D Title C

Name MICHALSKI, JENNIFER Name QUINTAL, ANNA Address 4980 SW 29 AVE Address 851 SW 63 AVE

City-State-Zip: FT LAUDERDALE FL 33312 City-State-Zip: PLANTATION FL 33317

Title D Title C

NameKWAK, HOLLIENameSORUNMU, AMANDAAddress6041 SW 9 STAddress8619 BUCKSKIN MANOR

City-State-Zip: PLANTATION FL 33317 City-State-Zip: DAVIE FL 33328

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHLEEN O'HARA PRESIDENT 03/11/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name RYAN, JACQUELINE Address 1271 NW 78 TERR

City-State-Zip: PLANTATION FL 33322

Title D

Name SANDOVAL, ANDREA Address 6110 ORCHID TREELN

City-State-Zip: TAMARAC FL 33319

Title I

Name COOMBS, DEBORAH

Address 11080 SW 9 PL
City-State-Zip: DAVIE FL 33324

Title D

Name NOVEMBRE, TIFFANY

Address 8079 SW 20 CT City-State-Zip: DAVIE FL 33324

Title D

Name TRODICK, AMY
Address 3511 NW 122 AVE
City-State-Zip: SUNRISE FL 33323

Title D

Name PIRTLE, LAURA
Address 5050 SW 70 AVE
City-State-Zip: DAVIE FL 33314

Title D

Name SEAGER, CHERYL Address 3900 SW 67 WAY City-State-Zip: DAVIE FL 33314

Title D

Name ZOUARI, SABINE Address 1285 SW 8 AVE

City-State-Zip: FT LAUDERDALE FL 33315

Title D

Name HARLEY, LESLIE

Address 4356 CARAMBOLA CIR N
City-State-Zip: COCONUT CREEK FL 33066