2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000001026

Entity Name: TROW ENGINEERING CONSULTANTS INC.

FILED Sep 24, 2007 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|---|--|---|--|
| 1300 MET 200 | ROPOLITAN E | BLVD | | |
| | SSEE, FL 323 | 08 | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | ROPOLITAN E | BLVD | | |
| 200 TALLAHA | SSEE, FL 323 | 08 | | |
| FEI Number | : 98-6032711 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | l Address of C | Current Registered Agent: | Name and Address of | of New Registered Agent: |
| TALLAHA: The above in the State | ROPOLITAN E SSEE, FL 323 anamed entity of Florida. | 08 US submits this statement for the រុ | ourpose of changing its registere | d office or registered agent, or both, |
| SIGNATUI | RE: MICHAEI | | | D-+- |
| | Electror | nic Signature of Registered Ag | ent | Date |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | GONSALVES, 1595 CLARK B | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | STRITESKY, V 1595 CLARK B | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | ENGLISH, H B 1595 CLARK B | Delete LVD. NTARIO L6T 4V1, | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | NG, TOM 11595 CLARK | Delete BLVD. NTARIO L6T 4V1, | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: | V (LISCHKOFF, J 1595 CLARK B | | Title: Name: Address: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MICHAEL KOSKI V 09/24/2007

City-St-Zip: BRAMPTON, ONTARIO L6T 4V1,