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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.
SIGNATURE: JOHN KOENIG PRESIDENT 03/19/2015

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S34474

Entity Name: TECHNICAL RESTORATION SERVICES, INC.

Current Principal Place of Business:

1730 S FEDERAL HWY 339 DELRAY BEACH, FL 33483

Current Mailing Address:

1730 S FEDERAL HWY 339 DELRAY BEACH, FL 33483

FEI Number: 59-3064800

Name and Address of Current Registered Agent:

KOENIG, JOHN C 1730 S FEDERAL HWY 339 DELRAY BEACH, FL 33483 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

Officer/Director Detail :			
Title	S	Title	DP
Name	KOENIG, LISA A	Name	KOENIG, JOHN
Address	1730 S FEDERAL HWY #339	Address	1730 S FEDERAL HWY #339
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	DELRAY BEACH FL 33483

Certificate of Status Desired: No

FILED Mar 19, 2015 Secretary of State CC3792686090

Date

Date