2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #451593

1. Entity Name
TECHNICAL SUPPORT INTERNATIONAL, INC.

FILED Aug 02, 2005 8:00 am Secretary of State 08-02-2005 90031 003 ***150.00

							12/2					
Principal Place of Business 1500 SAN REMO AVE. SUITE 125 CORAL GABLES, FL 33146				Mailing Address 1500 SAN REMO AVE. SUITE 125 CORAL GABLES, FL 33146					11 81188 11886 81188 1 8186 11	ay.		J Marin
2. Principal Place of Business				3. Mailing Address 19333 Collins AUF								
Suite, Apt. #, etc.				Suite, Apt. #, etc. 2402				07192005	Chg-P	CR2E0	34 (10/03)	
City & State				Suny Isles BEACH, F			FL	4. FEI Number Applied For 11-2330756 Not Applicable				
Zip		Country		^{Zip} 3 <i>3/60</i>	Cour	USA			of Status Desired	<u> </u>	\$8.75 Add Fee Required	
	6. Name	and Address of Curren	t Regis	stered Agent		Name		7. Name and	Address of New F	Registered A	\gent	
ATRIUM REGISTERED AGENTS, INC 1500 SAN REMO AVE, STE 125 CORAL GABLES, FL 33146						Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code	3			
8. 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. I am familiar with, and accept												
the above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the state of Fiorida. If am ramiliar with, and accept the obligations of registered agent. SIGNATURE Signature. Speed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
FII De	9. Election Campa Trust Fund Con	_			00 May Be ed to Fees	In accordance corporation did						
10.		OFFICERS AND	DIRE	IRECTORS 11.					CHANGES TO OFF	FICERS AND	DIRECTORS	S IN 11
TITLE	VPD			Delete	E	VPD	·	1 -		Change	☐ Addition	
NAME	KAPEL, ARTHUR 7700 NW 57TH ST			NAME STREET ADDRESS 1.			KAPE	APEL, ARTHUR 373 COLLING AVE. # 240 Z INNY ISLES BEACH, FC 33160				
STREET ADDRESS CITY-ST-ZIP	MIAMI, FL			CITY-SI- ZIP			193	NNY ISLES BEACH OF 33160				
TITLE					TITL	c	SUN	1104 25	CES BELL	u, π	□ Change	☐ Addition
NAME	VPD KAPEL, ARTHUR 1. 19333 COLLING AUG SUNNY ISLES BENCH, F			402 Li Delete	NAM						L. Unange	Addition
STREET ADDRESS	19333 Collins AUG				STR	EET ADDRESS						
CITY-ST-ZIP	SUMMY ISLES BEACH, F			7 - 33/60	CITY	r-ST-ZiP						
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NAME					NAM	_						
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NAME					NAN							
STREET ADDRESS CITY-ST-ZIP						eet address (-st-zip						
												☐ Address.
TITLE NAME	[☐ Delete	TITL						☐ Change	Addition
STREET ADDRESS						EET ADDRESS						
CITY-ST-ZIP					CITY	r-ST-ZIP						
12. I hereby of indicated	certify that th	e information supplied wi	th this f	filing does not qualify for and accurate and that	or the exe	emption sta	ted in Se	ction 119.07(3) same legal effe	(i), Florida Statutes.	I further cert	tify that the in	nformation or director

inducated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.