2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#837219

Entity Name: TECH PRODUCTS, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1264 D LA QUINTA DR 300 PLAZA DRIVE

ORLANDO, FL 32809 VESTAL, NY 13850 US

Current Mailing Address: New Mailing Address:

1264 D LA QUINTA DR 300 PLAZA DRIVE

ORLANDO, FL 32809 VESTAL, NY 13850 US

FEI Number: 59-1693932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCORMICK, LINDA WEST FLORIDA DISTRIBUTORS - TRACEY KLUMPP
4500 CARMICHAEL AVE.

1264 D LA QUINTA DR
ORLANDO, FL 32809 US
4500 CARMICHAEL AVE.
SARASOTA, FL 34234 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: TRACEY KLUMPP 04/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 JAMES, CHARLIE
 Name:
 KOFFMAN, JEFFREY P

 Address:
 1264 D LA QUINTA DRIVE
 Address:
 300 PLAZA DRIVE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 VESTAL, NY 13850

Title: CFO () Delete Title: CFO (X) Change () Addition

 Name:
 MCCORMICK, LINDA
 Name:
 KLUMPP, TRACEY

 Address:
 1264 D LA QUINTA DRIVE
 Address:
 300 PLAZA DRIVE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 VESTAL, NY 13850

Title: VP () Delete Title: VP (X) Change () Addition Name: CLINE, RICH Name: KOFFMAN, DAVID L

 Address:
 3551 NW 116TH STREET
 Address:
 300 PLAZA DRIVE

 City-St-Zip:
 MIAMI, FL 33167 33
 City-St-Zip:
 VESTAL, NY 13850

Title: S () Delete Title: () Change () Addition

 Name:
 KOFFMAN, JEFFREY
 Name:

 Address:
 300 PLAZA DRIVE
 Address:

 City-St-Zip:
 VESTAL, NY 13850
 City-St-Zip:

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.

SIGNATURE: DAVID LK. KOFFMAN VP 04/25/2008