

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000002283

**FILED**  
**Oct 12, 2005**  
**Secretary of State**

**Entity Name:** LINCOLN TECHNICAL SERVICES OF TEXAS, INC.

**Current Principal Place of Business:**

6555 NW 9TH AVE  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

2645 EXECUTIVE PARK DR.  
SUITE 114  
WESTON, FL 33331

**Current Mailing Address:**

431 STEPHANSON HWY  
TROY, MI 48083

**New Mailing Address:**

431 STEPHENSON HWY  
TROY, MI 48083

**FEI Number:** 38-2606688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHERNOW, AARON  
6555 NW 9TH AVE  
FT. LAUDERDALE, FL 33309 US

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

ROMAN, DAVID  
2645 EXECUTIVE PARK DR.  
WESTON, FL 33331 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: DAVID ROMAN

10/12/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CHERNOW, ALAN  
Address: 4321 ALPHA RD  
City-St-Zip: DALLAS, TX 75244

Title: DVPS ( ) Delete  
Name: JORDAN, ANDREW  
Address: 431 STEPHENSON HWY  
City-St-Zip: TROY, MI 48083

Title: T ( ) Delete  
Name: JORDAN, ANDREW  
Address: 431 STEPHENSON HWY  
City-St-Zip: TROY, MI 48083

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW JORDAN

DVPS

10/12/2005

Electronic Signature of Signing Officer or Director

Date