# F1600005713

(Requestor's Name)	
•	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Centiled Copies Centilicates of Status	_
Special Instructions to Filing Officer:	-
Special instructions to Filing Officer.	
Office Use Only	



12/28/16--01009--013 \*\*70.00



### S Warren

ų,

DEC 2 9 2016

#### **COVER LETTER**

i. ,

TO:	Registration Section
	Division of Corporations

Technical Advancement, Inc.

SUBJECT:

.

r

i

i

,

٤,

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: Ronald DeBellis

	Name of I	Person		
Profenna & DeBellis CPAs PC				
<u> </u>	Firm/Com	pany		
251 West Nyack Rd				
	Addre	ess	<u> </u>	
West Nyack, NY 10994				
**** <u> </u>	City/State a:	nd Zip code		
Ron@PandDCPAs.com				
E-mail a	address: (to be used f	or future annual report i	notification)	
For further information concerning	g this matter, please c	all:		
Ron DeBellis	845 at (	623-8555 x11 )		
Name of Person	Area Code	e Daytime Telep	hone Number	
STREET/COURIER AD	DRESS:	MAILING A	DDRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P.O. Box 6327		
2661 Executive Center Cir Tallahassee, FL 32301	cle	Tallahassee, F	L 32314	
Enclosed is a check for the followi	ng amount:			
-	5 Filing Fee & □ ficate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status	

Certificate of Status & Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

#### IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Technical Adva	neement, Inc.		
(Enter name of c	orporation; must include "INCORPORATED," " orp," "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,	,, , , , , , , , , , , , , , , , , , ,
New York		4-1642860	
(State or country	3	(FEI number, if app	plicable)
03/11/1983	5.		
(Date	of incorporation) 5	(Date of duration, if other t	than perpetual)
December 1, 20 6.	16		
274 E. Eau Gallie 7	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 Blvd, Suite 335, Indian Harbour Beach, FL 3293 (Drincipal	, F.S., to determine penalty liability	y)
	() thetpa	office address)	
8. Name and stree	(Current mailing : et address of Florida registered agent: (P.O. 1 Lawrence Weiner	address. if different) Box <u>NOT</u> acceptable)	THE FEE 28
Name:	Lawrence weiner		. or
Office Address:	274 E. Eau Gallie Blvd. Suite 335		A B
	Indian Harbour Beach	32937 , Florida	ATE
	(City)	(Zip code)	

9. Registered agent's acceptance:

r

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

. ..



10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

۰.

, 1

A. DIRE	CTORS			
Chairman:	Lawrence Weiner			
Address:	2453 Sea Avenue			
	Indialantic, FL 32903			
Vice Chai	rman:			
Address:				
- Director:	×			
Address:			· · · · · · · · · · · · · · · · · · ·	,
Director:			** **** ** ** ** ** ** ** ************	
Address:		10	2018	
B. OFFI	ICERS Lawrence Weiner	RALESS	÷ C	 
President:	2453 Sea Avenue		∞ 	<u>m</u>
Address:		STAT	ନ ଚ ଚ	0
Vice Pres	ident:		đ	
Address;	· · · · · · · · · · · · · · · · · · ·			·····
Secretary:				
Address:				
Treasurer:		·		
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers	and/or c	lirectors	
12	Signature of Director or Officer			
The offic are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms th and that he or she is aware that false information submitted in a document to the Depar egree felony as provided for in s.817.155, F.S.	at the fac tment of	ts stated State co	l herein onstitutes
	rence Weiner, President			

-----

÷

1 i

(Typed or printed name and capacity of person signing application)

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TECHNICAL ADVANCEMENT, INC. was filed on 03/11/1983, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

\*\*\*

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 08th day of December two thousand and sixteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State