2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2007 8:00 am

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DOCUMENT # F46896 1. Entity Name TECHNICAL MARKETING SERVICES, INC.					03-02-2007 90009 015 ***150.00				
Principal Plac	e of Business	Mailing Address			. ஆ ບ ບ	•-			
3313 INDUS	TRIAL 25TH ST	P 0B0X 1268							
P.O.BOX 126		P.O.BOX 1268							
FT PIERCE, F	L 34946 US	FT PIERCE, FL 34954	US		 	ALDIA AILAA ISIKA KSIID I	ENI BIBII BIBII I	IIAN AIAN AIAN AIA	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02192007	Chg-P	CR2E	(12/06)		
City & State		City & State			4. FEI Numbe 59-213				oplied For of Applicable
Zip	Country	Zip	Country			of Status Desired		\$8.75 Add	ditional
6. Name and Address of Current Registered Agent					7. Name and	Address of New	Registered		
			Name			7.00.000 01 11011	rtogiotoro:	· rigetti	
HOGAN, N	AICHAEL D								
3313 INDL	JSTRIAL 25TH ST		Street Address (P.O. Box Numbe	er is Not Acceptat	ole)		
FORT PIE	RCE, FL 34946				 .				
			City				F	Zip Cod	8
P. The above	and the state of t	- Ab						_	
the obligat	named entity submits this statement for tions of registered agent.	r the purpose of changing its re	gistered office of	er register	ed agent, or bot	th, in the State of F	-lorida. I ar	n tamiliar with,	and accept
SIGNATURE.									
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	legistered Agent signa	lure required	when reinstating)		DATE		
			-						
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	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0				00 May Be ed to Fees				
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment-with an address, with all other like empowered.

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

Date

Date

Dayine Phone #