## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000010373

FILED Dec 22, 2009 Secretary of State

| Entity Nai                                  | me: TECHS, INC.   |  |         |
|---|---|--|---------|
| Current P                                   | rincipal Place of Business:   | New Principal Place of Business:   |         |
| 1121 W GI<br>TAMPA, F                       | RACE STREET<br>L 33607  |  |         |
| Current Mailing Address:                    |   | New Mailing Address:   |         |
| 1121 W. G<br>TAMPA, F                       | RACE STREET<br>L 33607  |  |         |
| In accordan                                 | : 65-0933372 FEI Number Applied For<br>ce with s. 607.193(2)(b), F.S., the corporation<br>I Address of Current Registered Age | n did not receive the prior notice.                                      | ( )     |
| 1121 W. G<br>TAMPA, F<br>The above          |   | or the purpose of changing its registered office or registered agent, or | r both, |
| SIGNATU                                     | RE: CLEMMIE C. PERRY  |  |         |
|   | Electronic Signature of Register  | ed Agent Date  |         |
| OFFICERS AND DIRECTORS:                     |   | ADDITIONS/CHANGES TO OFFICERS AND DIRE                                   | ECTORS: |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | DP () Delete<br>REDDICK, DORIS R<br>1121 GRACE ST<br>TAMPA, FL 33607  | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:               |         |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | S () Delete<br>DANIELS, KIMBERLY<br>16740 SW 99 AVE<br>MIAMI, FL 33157  | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:               |         |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | T () Delete<br>MILLER, JEAN<br>P.O.BOX 1173<br>BRANDON, FL 33509  | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:               |         |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ( ) Delete<br>PERRY, CLEMMIE<br>1121 W. GRACE STREET<br>TAMPA, FL 33607   | Title: ( ) Change ( ) Addition Name: Address: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLEMMIE C PERRY D 12/22/2009