2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 13, 2010
Secretary of State

DOCUMENT# N07000008703

Entity Name: TECHNI-PRO FOUNDATION INC.

Current Principal Place of Business:

2206 W. ATLANTIC AVE.
DELRAY BEACH, FL 33445

New Principal Place of Business:

414 NW 35TH STREET
BOCA RATON, FL 33431

Current Mailing Address:

2206 W. ATLANTIC AVE.
DELRAY BEACH, FL 33445

New Mailing Address:

414 NW 35TH STREET
BOCA RATON, FL 33431

FEI Number: 26-0856132 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYPPOLITE, GILBERT
2206 W. ATLANTIC AVE.
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

HYPPOLITE, GILBERT
414 NW 35TH STREET
BOCA RATON, FL 33431 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: _____ 04/13/2010
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HYPPOLITE, GILBERT
Address: 14888 ENCLAVE LAKES DR. #C4
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: LIVIO, KATIC
Address: 414 NW 35TH STREET
City-St-Zip: BOCA RATON, FL 33431

Title: D
Name: POOLE, JULENE K
Address: 3009 S TERR DR.
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D
Name: TIBERT, KERLING
Address: 6712 HERITAGE GRANDE #2301
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby 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 all other like empowered.

SIGNATURE: GILBERT HIPPOLITE PD 04/13/2010
Electronic Signature of Signing Officer or Director — Date