2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000051792

City-St-Zip:

Entity Name: TRIAD TECHNICAL SERVICES, INC.

FILED Jul 19, 2002 Secretary of State

Current Principal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
6554 WHIRLAWAY CIRCLE ORLANDO, FL 32818		1224 W. HARVARD S ORLANDO, FL 32804		
Current Mailing Address:		New Mailing Addres	s:	
6554 WHIRLAWAY CIRCLE ORLANDO, FL 32818		1224 W. HARVARD S ORLANDO, FL 32804	• •	
FEI Number: 59-3709585	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BROWN, MICHAEL A 6554 WHIRLAWAY CIRCLE ORLANDO, FL 32818		BROWN, MICHAEL A 1224 W. HARVARD S ORLANDO, FL 32804	ST.	
The above named entity in the State of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:			07/19/2002	
Electro	nic Signature of Registered Ag	ent	Date	
	o satisfy its Intangible Tax filing red	quirement and elects to do so (X).		
OFFICERS AND DIREC	CTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: (Name: Address:) Delete	Title: MR. Name: BROWN, M Address: 1224 W. H	()Change(X)Addition ICHAEL A RVARD ST.	

City-St-Zip: ORLANDO, FL 32804 US

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: MICHAEL A. BROWN MR. 07/19/2002