2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120464

Entity Name: TRENCHLESS SPECIALTIES INC.

FILED Apr 08, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ER STAR RD), FL 32804				
Current Mailing Address:			New Mailing Address:		
	ER STAR RD), FL 32804				
FEI Number	: 60-0001111	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
2300 SILV	ER, RANDALL ER STAR RD), FL 32804	US			
	named entity e of Florida.	submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	NOWACK, ROI #823 3 BENTA) Delete BERT LL CTR 595 BURRARD ST PO 49224 CA V7X 1L2 CA	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (BRATCHER, R 2300 SILVER S ORLANDO, FL	STAR RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (SJOROOS, KII) Delete √IMO	Title: Name:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RANDALL BRATCHER VP 04/08/2009

15615 ALTON PARKWAY, SUITE 450

IRVINE, CA 92618

Address: City-St-Zip: