

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104623

Entity Name: TECHCENTRIC SOLUTIONS INC.

FILED  
Jan 11, 2005  
Secretary of State

## Current Principal Place of Business:

11539 TWIN OAKS TR  
JACKSONVILLE, FL 32258

## New Principal Place of Business:

## Current Mailing Address:

11539 TWIN OAKS TR  
JACKSONVILLE, FL 32258

## New Mailing Address:

3540 LAUREL LEAF DR  
ORANGE PARK, FL 32065

FEI Number: 74-3063227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NARGUNDKAR, ANIL  
11539 TWIN OAKS TRL  
JACKSONVILLE, FL 32258 US

## Name and Address of New Registered Agent:

NARGUNDKAR, ANIL  
3540 LAUREL LEAF DR  
ORANGE PARK, FL 32065 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: ANIL NARGUNDKAR

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: NARGUNDKAR, ANIL  
Address: 11539 TWIN OAKS TR  
City-St-Zip: JACKSONVILLE, FL 32258

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: NARGUNDKAR, ANIL  
Address: 3540 LAUREL LEAF DR  
City-St-Zip: ORANGE PARK, FL 32065

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: ANIL NARGUNDKAR

DP

01/11/2005

Electronic Signature of Signing Officer or Director

Date