## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000031582

Entity Name: TECHNICAL SERVICE SOLUTIONS INC

FILED Feb 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4545 NW 103 AVE 365 SW LOG DRIVE

201 PORT SAINT LUCIE, FL 34953

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

361 SW DE GOUVEA TERRACE 365 SW LOG DRIVE

PORT ST LUCIE, FL 34984 PORT ST LUCIE, FL 34953

FEI Number: 56-2334085 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WAGNER, MARIE A PRES
361 SW DE GOUVEA TERRACE
WAGNER, MARIE A PRES
365 SW LOG DRIVE

PORT ST LUCIE, FL 34984 US PORT ST LUCIE, FL 34953 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: MARIE WAGNER 02/23/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition Name: WAGNER, MARIE A Name: WAGNER, MARIE A

 Address:
 361 SW DE GOUVEA TERRACE
 Address:
 365 SW LOG DRIVE

 City-St-Zip:
 PORT ST LUCIE, FL 34984
 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: PISASIK\_ROBERT S VP Name: PISASIK\_ROBERT S VP

Name:PISASIK, ROBERT S VPName:PISASIK, ROBERT S VPAddress:361 SW DE GOUVEA TERRACEAddress:365 SW LOG DRIVECity-St-Zip:PORT ST LUCIE, FL 34984City-St-Zip:PORT ST LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MARIE A WAGNER PRES 02/23/2006