

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172865

Entity Name: TECHNO CONSULT, INC.

FILED
Apr 13, 2008
Secretary of State

Current Principal Place of Business:

107 GARDENS DR
SUITE 202
POMPANO BEACH, FL 33069

New Principal Place of Business:

1858 SW 175TH AVE
MIRAMAR, FL 33029

Current Mailing Address:

107 GARDENS DR
SUITE 202
POMPANO BEACH, FL 33069

New Mailing Address:

1858 SW 175TH AVE
MIRAMAR, FL 33029

FEI Number: 56-2493947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLIVEIRA, JOSILDO
107 GARDENS DR
SUITE 202
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

OLIVEIRA, JOSILDO
1858 SW 175TH AVE
MIRAMAR, FL 33029 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: _____

04/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: OLIVEIRA, JOSILDO
Address: 107 GARDENS DR SUITE 202
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: VTD () Delete
Name: ANTONIO-MONGUI, LUZ H
Address: 107 GARDENS DR SUITE 202
City-St-Zip: POMPAN0 BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: OLIVEIRA, JOSILDO
Address: 1858 SW 175TH AVE
City-St-Zip: MIRAMAR, FL 33029

Title: VTD (X) Change () Addition
Name: ANTONIO-MONGUI, LUZ H
Address: 1858 SW 175TH AVE
City-St-Zip: MIRAMAR, FL 33029

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.

SIGNATURE: JOSILDO OLIVEIRA

PSD

04/13/2008

Electronic Signature of Signing Officer or Director

Date