

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101441

FILED
Apr 29, 2006
Secretary of State

Entity Name: TECHPC CORPORATION

Current Principal Place of Business:

5205 SOUTH ORANGE AVE.
SUITE D
ORLANDO, FL 32809

New Principal Place of Business:

P.O. BOX 592420
ORLANDO, FL 328592420

Current Mailing Address:

5205 SOUTH ORANGE AVE.
SUITE D
ORLANDO, FL 32809

New Mailing Address:

P.O. BOX 592420
ORLANDO, FL 328592420

FEI Number: 20-3199960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, BELIXA
5205 SOUTH ORANGE AVE
SUITE D
ORLANDO, FL., FL 32809 US

Name and Address of New Registered Agent:

COLEMAN, BELIXA
P.O. BOX 592420
ORLANDO, FL., FL 328092420 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: _____

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLEMAN, BELIXA
Address: 5205 SOUTH ORANGE AVE SUITE D
City-St-Zip: ORLANDO, FL 32809

Title: VP () Delete
Name: COLEMAN, ROBERT
Address: 5205 SOUTH ORANGE AVE. SUITE D
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLEMAN, BELIXA
Address: P.O. BOX 592420
City-St-Zip: ORLANDO, FL 328592420

Title: VP (X) Change () Addition
Name: COLEMAN, ROBERT
Address: P.O. BOX 592420
City-St-Zip: ORLANDO, FL 328592420

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: BELIXA COLEMAN

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date