

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101441

Entity Name: TECHPC CORPORATION

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 592420
ORLANDO, FL 328592420

New Principal Place of Business:

5205 S. ORANGE AVE
ORLANDO, FL 328093054

Current Mailing Address:

P.O. BOX 592420
ORLANDO, FL 328592420

New Mailing Address:

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
P.O. BOX 592420
ORLANDO, FL., FL 328092420 US

Name and Address of New Registered Agent:

COLEMAN, BELIXA
5803 CHIPOLA CIRCLE
ORLANDO, FL., FL 32839 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: _____ 04/30/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BELIXA COLEMAN P 04/30/2007
Electronic Signature of Signing Officer or Director Date