

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000143483

Entity Name: TECH TRONIX PRO INC.

**FILED**  
**Aug 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3 REDWOOD TRACK TRACE  
OCALA, FL 34472

**New Principal Place of Business:**

1416 NW 13TH PL  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

P.O. BOX 830971  
OCALA, FL 34483

**New Mailing Address:**

P.O. BOX 6462  
FORT LAUDERDALE, FL 33310

FEI Number: 20-3707679

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSSELL, ROBERT C  
3 REDWOOD TRACK TRACE  
OCALA, FL 34472 US

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

RUSSELL, ROBERT C  
1416 NW 13TH PL  
FORT LAUDERDALE, FL 33311 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: ROBERT RUSSELL

08/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: RUSSELL, ROBERT C  
Address: PO BOX 6462  
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: DST  
Name: RUSSELL, TIFFANY R  
Address: P.O. BOX 6462  
City-St-Zip: FORT LAUDERDALE, FL 33310

I hereby 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 all other like empowered.

SIGNATURE: ROBERT C. RUSSELL

MR

08/30/2010

Electronic Signature of Signing Officer or Director

Date