

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 NOV 23 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P35621

1. Corporation Name

TECHNOLOGY PARTNERSHIP SERVICES, INC.

Principal Place of Business

Mailing Address

6330 GULFTON
HOUSTON TX 77081

6330 GULFTON
HOUSTON TX 77081



REINSTATEMENT

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 303

5. FEI Number

76-0322944

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
F D	MCWILLIAMS, GEORGIA KATZ, JEROLD B.	6330 GULFTON 6330 Gulfton	HOUSTON TX Houston, TX 77081
VS P	LEIGHTON, WILLIAM R. TAYLOR, FRANK A.	6330 GULFTON 6330 Gulfton	HOUSTON TX Houston, TX 77081
F S	FOX, PAUL STOUT, RODGER A.	6330 GULFTON 6330 Gulfton	HOUSTON TX Houston, TX 77081
V CFO	DANAHUE, PAUL G. HENDRIX, JOHN L.	6330 GULFTON 6330 Gulfton	HOUSTON TX Houston, TX 77081
V	STOUT, RODGER	6330 GULFTON	HOUSTON TX
AV	LANG, CHRISTOPHER	6330 GULFTON	HOUSTON TX

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

300002706249-7

Suite, Apt. #, Etc.

12/08/98-01050-019

City

***758.75

State

FL

Zip Code

***758.75

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Victor Alfaro

REQUIRED

Date 11/16/98

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

11-18-98

(713) 777-4441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John L. Hendrix, Chief Financial Officer

CR2040 (9/98)