Apr-18-03 02:26pm From-Kirk Pinkerton Law Firm 9413648227

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91416 013 ***150.00

DOCUMENT # P99000032599

1. Entity Name
TECHNOLOGY PERFORMANCE GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
4132 20th ST. W.	P.O. BOX 21203	
Suite, Apt. #, etc. B	Suite, Apt. #, etc.	
City & State BRADENTON FL	City & State BRADENTON FL	4. FEI Number 650909814 ☐ Applied For ☐ Not Applicable
Zip 34205 Country USA	Zip 34204 Country USA	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Mark Wolfgram
Street Address (P.O. Box Number is Not Acceptable): 4132 20th ST W
City: Bradenton FL Zip Code: 34205

8. 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: _____ DATE: 4/28/03
Signature, typed or printed name of registered agent and title if agent is a corporation (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. FEES OFFICERS AND DIRECTORS

TITLE P NAME MARK WOLFGRAM STREET ADDRESS 4132 20th ST W CITY-ST-ZIP Bradenton FL 34205		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034R (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/28/03 941-739-7161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #