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FILED
Jun 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S12900

1. Corporation Name

Tech Management Solutions Inc.

Principal Place of Business

Mailing Address

3700 Airport Rd
Suite 405
Boca Raton FL 33431

3700 Airport Rd
Suite 405
Boca Raton, FL
33431

2. Principal Place of Business

2a. Mailing Address

21 3700 Airport Road

26 3700 Airport Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 405

27 Suite 405

City & State

City & State

23 Boca Raton FL

28 Boca Raton FL

24 Zip 33431

Country

25 USA

29 Zip 33431

Country

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

11/02/1990

08/1996

4. FEI Number

Applied For

65-0239107

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

Posner, Pamela R.
3700 Airport Road Suite 405
Boca Raton, FL 33431

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME Posner, Dora

STREET ADDRESS 555 Piedmont L, Kings Pt

CITY-ST-ZIP Delray Beach, FL 33484

TITLE ☐ DELETE

NAME Posner, Pamela R.

STREET ADDRESS 22761 Neptune Rd.

CITY-ST-ZIP Boca Raton, FL 33428

TITLE ☐ DELETE

NAME Posner, Harold H.

STREET ADDRESS 555 Piedmont L, Kings Point

CITY-ST-ZIP Delray Beach, FL 33484

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

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43 STREET ADDRESS

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pamela Posner Pamela Posner 5/1/97 (561)347-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 8324

CR2E034 (9/96)