


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

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| DOCUMENT # V09035 |  |
| 1. Entity Name FRENSCH TECHNOLOGY SERVICES, INC. | |

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| Principal Place of Business 107 WAX MYRTLE LN LONGWOOD, FL 32779 US | Mailing Address PO BOX 160303 ALTAMONTE SPRINGS, FL 32716 US |
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 59-3101485 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent FRANKE, JOHN 107 WAX MYRTLE LANE LONGWOOD, FL 32779 | DO NOT WRITE IN THIS SPACE |
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| 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. I am familiar with, and accept the obligations of registered agent. | 0000000318665 05/13/08-80091-012 150.00 |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | DATE _____ |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FRENSCH, JOLANDA 107 WAX MYRTLE LN LONGWOOD, FL 32779 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FRANKE, JOHN 107 WAX MYRTLE LANE LONGWOOD, FL 32779 |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | |
| SIGNATURE: <u><i>Jolanda Frensch</i></u> / Jolanda Frensch <u>4/21/08</u> <u>407-862-5999</u> | <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> |