## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002211

Entity Name: TECHSERVE ALLIANCE SERVICES CORP.

**Current Principal Place of Business:** 

1420 KING ST., STE. 610 ALEXANDRIA. VA 22314

**Current Mailing Address:** 

1420 KING ST., STE. 610 ALEXANDRIA, VA 22314

FEI Number: 20-1201414 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

FILED Mar 24, 2017

**Secretary of State** 

CC5335180840

Officer/Director Detail:

Title TREA

Name NUNN, TOM

Address 1420 KING ST., STE. 610

City-State-Zip: ALEXANDRIA VA 22314

Title AS

Name ROBERTS, MARK

Address 1420 KING ST., STE. 610

City-State-Zip: ALEXANDRIA VA 22314

Title CEO

Name ROBERTS, MARK

Address 1420 KING STREET, STE 610

City-State-Zip: ALEXANDRIA VA 22314

Title VP

Name ZAZISKI, MINDY

Address 1420 KING ST., STE. 610 City-State-Zip: ALEXANDRIA VA 22314 Title

SEC

Name NUNN, TOM

Address 1420 KING ST., STE. 610

City-State-Zip: ALEXANDRIA VA 22314

Title CHAIRMAN

Name TIMOTHY, ENOCH

Address 1420 KING ST., STE. 610

City-State-Zip: ALEXANDRIA VA 22314

Title PRESIDENT

Name ZAZISKI, MINDY

Address 1420 KING STREET

SUITE 610

City-State-Zip: ALEXANDRIA VA 22314

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: MARK ROBERTS

Electronic Signature of Signing Officer/Director Detail

**CEO** 

03/24/2017 Date