


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000004064

1. Entity Name
NEW YORK WIRE COMPANY



Principal Place of Business Mailing Address

**152 N. MAIN ST
 MT WOLF, PA 17347-0866** **P.O. BOX 866
 MT WOLF, PA 17347-0866**

DO NOT WRITE IN THIS SPACE



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number 23-3022760	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SALCEDO, ROBERTA
 9710 NW 91 COURT
 MIAMI, FL 33178**

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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.

SIGNATURE _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOUGLAS, BARRY N 1141 OVERBROOK COURT YORK, PA 17403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FINNEGAN, LARRY 25 BRAEBURHN COURT YORK, PA 17404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPF SENKOWSKI, WALTER J 1837 BRUBAKER RUN ROAD LANCASTER, PA 17603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD COOK, J.P. JR. 6995 ROUNTOP LANE WRIGHTSVILLE, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, JAMES C SUITE 110, 150 MORRISTOWN ROAD BERNARDSVILLE, NJ 07924
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/20/06-80035-019 158.75

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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: Walter J. Senkowski 2/8/06 717-266-5626
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #