## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G55930

FILED Feb 19, 2004 Secretary of State

Entity Name: SMITHS INTERCONNECT MICROWAVE COMPONENTS, INC.

Current Principal Place of Business: 8851 SW OLD KANSAS AVE STUART, FL 34997 US		New Principal Place of Business:		
Current Mailing Address: 8851 SW OLD KANSAS AVE		New Mailing Addres	ss:	
FL 34997				
: 59-2311425	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
TH PINE ISLA	ND RD.			
	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
RE:				
Electro	nic Signature of Registered Age	ent	Date	
mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
PHIPSON, STI 765 FINCHLE	EPHAN 7 ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
HAYES, PAUL 765 FINCHLE	,	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
CHILDS HILL,	LONDON, OR NUTTIONS	only of Zip.		
T ( ORME, WALT	) Delete ER OOD DRIVE, SUITE 125	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
	DLD KANSAS FL 34997  Iailing Addres DLD KANSAS FL 34997  : 59-2311425  I Address of ( ORATION SYS TH PINE ISLA ION, FL 3332  I named entity of Florida.  RE:  Electro  mpaign Financin  S AND DIREC P ( PHIPSON, STE 765 FINCHLES CHILDS HILL, VP ( HAYES, PAUL	DLD KANSAS AVE FL 34997 US  Iailing Address: DLD KANSAS AVE FL 34997  : 59-2311425 FEI Number Applied For ( )  I Address of Current Registered Agent:  ORATION SYSTEM TH PINE ISLAND RD. ION, FL 33324 US  In named entity submits this statement for the period of Florida.  RE:  Electronic Signature of Registered Agent  mpaign Financing Trust Fund Contribution ( ).  S AND DIRECTORS:  P ( ) Delete PHIPSON, STEPHAN 765 FINCHLEY ROAD CHILDS HILL, LONDON, NW118DS  VP ( ) Delete	DLD KANSAS AVE FL 34997 US  Railing Address:  DLD KANSAS AVE FL 34997  September 1997  Respectively of the purpose of changing its registered and purpose of folials.  Respectively of Florida.  Respectively of Polete Philpson, Stephan (and polete)  P (and Delete Philpson, Stephan (but of the purpose)  P (but of Delete Philpson, Stephan (but of the purpose)  P (but of Delete Philpson, Stephan (but of the purpose)  P (but of Delete Philpson, Stephan (but of the purpose)  Respectively of Delete Philpson, Stephan (but of the purpose)  Name and Address (but of the purpose)  A	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: WALTER ORME T 02/19/2004