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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations								
SUBJECT: Southwest Signal Engineering Co (Name of corporation)								
DOCUMENT NUMBER: P020000 54964								
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
James L. Mayer (Name of person)								
(Name of person)								
Southwest Signal Engineering Co. (Name of firm/company)								
(Name of firm/company)								
7235 BONNEUAL ROAD								
(Address)								
TACKSONVILLE, FL 32256 (City/state and zip code)								
For further information concerning this matter, please call:								
For further information concerning this matter, please can:								
Name of person) at (904) 443-0083 (Area code & daytime telephone number)								
Enclosed is a \$35.00 check made payable to the Department of State.								
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399								

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

change is submitte	-				17.1508, Florida St. e of			•
to change its regis	stered office or	registered agei	nt, or both,	in the State of I		,	-	
1. The name of the	e corporation:_	50074 W	vest	Signal	Enginee	ring	Co	
2. The principal o	ffice address:	7235	BON	NEVAL	ROAD	ŕ		
 	· · · · · · · · · · · · · · · · · · ·	JACKSO	NVILL	E, FL	32256			
3. The mailing ad	dress (if differe	nt):						
4. Date of incorpo	oration/qualifica	tion: 12/6	188	Document	number: PO 200	000 54	964	
	street address of	•		· -· · - 	d office on file with	·=		
_	JAME-	s L. /	MAYER	Z				
	8011	Philips	Huy					
_	JACKS	onville	, FL	3225	4		•	
6. The name and s (if changed):		BONA	eval	Road		ALLAHASSE	01 HAY: 18	1
•••		(P.O. Box	or personal mai	Ibox NOT acceptable	······································	OF ST	PH 12: 2	
The street address changed will be is	s of its registere dentical.	ed office and t	he street ad	ldress of the bu	siness office of its	registered a		s
Such change was the board, or the	authorized by corporation has	resolution duly been notified	y adopted b in writing	oy its board of of the change.	directors or by an o	fficer so au	thorize	d by
Jan 1 M	ayer			JA.	Mes L. M.		PRESI.	DENT
<i>{</i> /	nature of an officer of the appointment comply with the familiar with ar by to reflect a ch vriting of this c		agent and of all statute obligation of gistered of	agree to act in es relative to th of my position of fice address, I	this capacity te proper and comp is registered agent hereby confirm tha	•	nance e docum ation h	of my ent is as
la 1	Mayer				15 M AY 2	2004		
(S	ignature of Registere	d Agent)	·		(Dat	e)		
If signing on beha	alf of an entity:							
	Typed or Printed Na	eme)	· · · · · · · · · · · · · · · · · · ·	· .	(Capac	eity)		 .

* * * FILING FEE: \$35.00 * * *