## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000046906

Entity Name: SV MICROWAVE COMPONENTS GROUP, INC.

FILED Apr 08, 2005 Secretary of State

•			<b>,</b>		
Current Principal Place of Business:			New Princi	New Principal Place of Business:	
2400 CENTREPARK WEST DR WEST PALM BEACH, FL 33409			SUITE 100	2400 CENTREPARK WEST DR SUITE 100 WEST PALM BEACH, FL 33409	
Current M	lailing Addre	ss:	New Mailir	New Mailing Address:	
2400 CENTREPARK WEST DR WEST PALM BEACH, FL 33409			2400 CENTREPARK WEST DR SUITE 100 WEST PALM BEACH, FL 33409		
FEI Number:	: 65-0946475	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:	
PORTER, MICHAEL J 2400 CENTREPARK WEST DRIVE WEST PALM BEACH, FL 33409 US			2400 CEŃT SUITE 100	JANNEY, CJ 2400 CENTREPARK WEST DRIVE SUITE 100 WEST PALM BEACH, FL 33409 US	
	named entity e of Florida.	submits this statement for the	purpose of changing it	s registered office or registered agent, or bot	
SIGNATURE: CJ JANNEY				04/08/2005	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	MARTIN, W. C 2400 CENTRE	) Delete : :PARK WEST DR STE 100 BEACH, FL 33409	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MORELLI, JOI 2400 CENTRE	() Delete HN :PARK WEST DR STE 100 BEACH, FL 33409	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	COLAIANNI, V	ENUE, 7TH FLOOR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	D (	) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CJ JANNEY CFO 04/08/2005

KATREAGADDA, SUBRAMANIAM

WEST PALM BEACH, FL 33409

2400 CENTREPARK WEST DR., STE. 100

Name:

Address:

City-St-Zip: