2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 561913

City-St-Zip:

TAMPA, FL 33616

Entity Name: TAMPA PRINTED CIRCUIT CORP.

FILED Mar 02, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
5413 JET\ TAMPA, F	VIEW CIRCLE EL 33634			
Current Mailing Address:			New Mailing Address:	
P O BOX : TAMPA, F		8		
FEI Number	: 59-1802441	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
	TY, PETER D VIEW CIRCLE EL 33634 US	3		
	e named entity s e of Florida.	submits this statement for the	ourpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
	Electron			
	2,000,011	ic Signature of Registered Ag	ent	Date
Election Ca		ic Signature of Registered Ag	ent	Date
		g Trust Fund Contribution ().		Date ES TO OFFICERS AND DIRECTOR
	mpaign Financing	Trust Fund Contribution (). TORS: Delete IGELO		
OFFICER Title: Name: Address:	MGR () BEVACQUA, AN 38835 ELLA DF LADY LAKE, FL	Trust Fund Contribution (). TORS: Delete IGELO R 32726 Delete ERT DD LANE	ADDITIONS/CHANGI Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	MGR () BEVACQUA, AN 38835 ELLA DE LADY LAKE, FL T () HUNTER, ROBE 315 CORKWOO OLDSMAR, FL	Trust Fund Contribution (). TORS: Delete IGELO R . 32726 Delete ERT DD LANE 34677 Delete IN IS DR	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: PETER RAFFERTY D 03/02/2008