## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G55930

Apr 26, 2012 Secretary of State

Entity Name: SMITHS INTERCONNECT MICROWAVE COMPONENTS, INC.

**New Principal Place of Business: Current Principal Place of Business:** 8851 SW OLD KANSAS AVE STUART, FL 34997 US **Current Mailing Address: New Mailing Address:** 8851 SW OLD KANSAS AVE STUART, FL 34997 FEI Number: 59-2311425 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

DUPELL, BRIAN Name:

8851 SW OLD KANSAS AVE Address: City-St-Zip: STUART, FL 34997

Title:

Name: ANGELO, JAY

350 CONEJO RIDGE AVENUE Address: THOUSAND OAKS, CA 91361 City-St-Zip:

Title:

HARRISON, MARK Name: 8851 SW OLD KANSAS AVE Address:

City-St-Zip: STUART, FL 34997

Title:

Name:

PHLLIPS, RALPH

Address: 350 CONEJO RIDGE AVENUE City-St-Zip: THOUSAND OAKS, CA 91361

Title:

Name: HEITMANN, MARY

Address: 6350 CONEJO RIDGE AVENUE City-St-Zip: THOUSAND OAKS, CA 91361

Title:

THOMPSON, SHAWN Name: 10701 AIRPORT DRIVE Address: HAYDEN, ID 83835 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: M.P. HARRISON O 04/26/2012