

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J15822

Entity Name: QUALICOM SYSTEMS, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

2100 ELECTRONICS LANE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

2100 ELECTRONICS LANE
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 59-2684589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DWYER, MARGARET M
13500 POWERS COURT
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

DWYER, MARGARET M
13500 POWERS COURT
SUITE 200
FORT MYERS, FL 33912 US

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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DWYER, CHRISTOPHER B P
Address: 2100 ELECTRONICS LANE
City-St-Zip: FORT MYERS, FL 33912

Title: T () Delete
Name: DWYER, MARGARET M T
Address: 13500 POWERS COURT
City-St-Zip: FORT MYERS, FL 33912

Title: ASD () Delete
Name: DWYER, VIRGINIA E. ASD
Address: 2100 ELECTRONICS LANE
City-St-Zip: FT. MYERS, FL

Title: S () Delete
Name: MONTERO, THERESA COX S
Address: 13500 POWERS COURT
City-St-Zip: FT. MYERS, FL 33912

Title: D () Delete
Name: DWYER, JAMES A JR
Address: 13500 POWERS COURT
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: DWYER, NANCY L
Address: 2100 ELECTRONICS LANE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ASD (X) Change () Addition
Name: DWYER, VIRGINIA E ASD
Address: 2100 ELECTRONICS LANE
City-St-Zip: FT. MYERS, FL

Title: S (X) Change () Addition
Name: MONTERO, THERESA C S
Address: 13500 POWERS COURT
City-St-Zip: FT. MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: CHRISTOPHER B DWYER

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date