

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K44722

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: FORCON PRECISION PRODUCTS INC.

## Current Principal Place of Business:

1110 PINE ISLAND RD., #28  
CAPE CORAL, FL 33909 US

## New Principal Place of Business:

1110 NE PINE ISLAND RD.  
SUITE #28  
CAPE CORAL, FL 33909 US

## Current Mailing Address:

1110 PINE ISLAND RD., #28  
CAPE CORAL, FL 33909 US

## New Mailing Address:

1110 NE PINE ISLAND RD.,  
SUITE #28  
CAPE CORAL, FL 33909 US

FEI Number: 65-0080263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOGUSLAWSKI, HENRY  
1110 PINE ISLAND ROAD, #28  
#28  
CAPE CORAL, FL 33909 US

## Name and Address of New Registered Agent:

BOGUSLAWSKI, HENRY  
1110 PINE ISLAND ROAD,  
#28  
CAPE CORAL, FL 33909 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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: PAUL SAALMULLER  
Address: 1110 PINE ISLAND ROAD, #28  
City-St-Zip: CAPE CORAL, FL

Title: P ( ) Delete  
Name: BOGUSLAWSKI, HENRY  
Address: 1110 PINE ISLAND RD., #28  
City-St-Zip: CAPE CORAL, FL 33909

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition  
Name: PAUL SAALMULLER  
Address: 1110 PINE ISLAND ROAD, #28  
City-St-Zip: CAPE CORAL, FL 33909 US

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: HENRY BOGUSLAWSKI

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date