


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # K71149 1. Entity Name ARRAY CONNECTOR CORPORATION		
Principal Place of Business 12400_8 SW 134 CT MIAMI, FL 33186 US	Mailing Address 12400_8 SW 134 CT MIAMI, FL 33186 US	



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0111115	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

6. Name and Address of Current Registered Agent MCPHERSON, WILLIAM C III 12400_8 SW 134 CT MIAMI, FL 33186		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCPHERSON, WILLIAM 12400-8 SW 134 CT MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS MCPHERSON, NANCY 12400-8 SW 134 CT MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SILVERBERG, DAN 12400-8 SW 134 CT MIAMI, FL 33186
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered	
SIGNATURE: <i>Dan Silverberg</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: 1-3-08 305-234-1000 Daytime Phone: #