

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000000657

Entity Name: SWISS COMPONENTS, INC.

FILED  
Nov 17, 2008  
Secretary of State

## Current Principal Place of Business:

405 W. DRIVE  
SUITE A  
MELBOURNE, FL 32904

## New Principal Place of Business:

405 WEST DRIVE  
SUITE A  
MELBOURNE, FL 32904

## Current Mailing Address:

405 WEST DRIVE  
SUITE A  
MELBOURNE, FL 32904

## New Mailing Address:

FEI Number: 59-3621487      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TELEBRICO, ABNER  
405 WEST DRIVE  
SUITE A  
MELBOURNE, FL 32904 US

## Name and Address of New Registered Agent:

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: MR. ABNER TELEBRICO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: MORRIS, BERNICE  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

Title: PD ( ) Delete  
Name: TELEBRICO, ABNER  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

Title: VD ( ) Delete  
Name: TELEBRICO, FLORECIL R  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

Title: SD (X) Delete  
Name: TELEBRICO, TERRI  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition  
Name: MORRIS, BERNICE OWNER  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

Title: PD (X) Change ( ) Addition  
Name: TELEBRICO, ABNER PRES  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

Title: SD (X) Change ( ) Addition  
Name: TELEBRICO, TERRI SEC  
Address: 405 WEST DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 32904

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: MR. ABNER TELEBRICO

Electronic Signature of Signing Officer or Director

PRES

11/17/2008

Date