

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017413

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: TECHNOCABLE WIRING SPECIALIST, INC.

## Current Principal Place of Business:

6508 EVERINGHAM LN.  
SANFORD, FL 32771

## New Principal Place of Business:

6200 BORDEAUX CIR  
SANFORD, FL 32771

## Current Mailing Address:

6508 EVERINGHAM LN.  
SANFORD, FL 32771

## New Mailing Address:

6200 BORDEAUX CIR  
SANFORD, FL 32771

FEI Number: 59-3628062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SILVA, ALINE  
6508 EVERINGHAM LN.  
SANFORD, FL 32771 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SILVA, HUMBERTO  
Address: 6508 EVERINGHAM LN.  
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete  
Name: SILVA, ALINE  
Address: 6508 EVERINGHAM LN.  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SILVA, HUMBERTO  
Address: 6200 BORDEAUX CIR.  
City-St-Zip: SANFORD, FL 32771

Title: D (X) Change ( ) Addition  
Name: SILVA, ALINE  
Address: 6200 BORDEAUX CIR.  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: ALINE SILVA

MRS.

04/27/2006

Electronic Signature of Signing Officer or Director

Date