

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000083282

FILED
Oct 09, 2007
Secretary of State

Entity Name: ELECTRICAL WIRING SOLUTIONS, INC.

Current Principal Place of Business:

30 PINELYNN DRIVE
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

P.O BOX 351482
PALM COAST, FL 32135 US

New Mailing Address:

FEI Number: 59-3743131 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SMITH, MARK E
30 PINELYNN DRIVE
PALM COAST, FL 32164 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, MARK E
Address: 30 PINELYNN DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: S () Delete
Name: SMITH, JARNETTE L
Address: 30 PINELYNN DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: AS () Change (X) Addition
Name: SMITH, ZACHARY S
Address: 30 PINELYNN DRIVE
City-St-Zip: PALM COAST, FL 32164

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: JARNETTE SMITH

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10/09/2007

Electronic Signature of Signing Officer or Director

Date