

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000090470

FILED
Jan 06, 2005
Secretary of State

Entity Name: SPECIALIZED MECHANICAL COMPONENTS, INC.

Current Principal Place of Business:

315 STAN DRIVE #9
MELBOURNE, FL 32904

New Principal Place of Business:

4200 DOW ROAD
SUITE D
MELBOURNE, FL 32934

Current Mailing Address:

P.O. BOX 120296
MELBOURNE, FL 329120296

New Mailing Address:

4200 DOW ROAD
SUITE D
MELBOURNE, FL 32934

FEI Number: 59-3744027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARNIFAX, CHARLES MARK
315 STAN DRIVE #9
MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

CARNIFAX, CHARLES MARK
4200 DOW ROAD
SUITE D
MELBOURNE, FL 32934 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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARNIFAX, CHARLES MARK
Address: 315 STAN DRIVE #9
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARNIFAX, CHARLES MARK
Address: 4200 DOW ROAD, SUITE D
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES MARK CARNIFAX, PRES.

D

01/06/2005

Electronic Signature of Signing Officer or Director

Date