

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056079

Entity Name: WIRENPARTS INC

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

5656 ISABELLE AVE
1A
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

5656 ISABELLE AVE
1A
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 59-3533412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFEBVRE, EDMOND B
5656 ISABELLE AVE
1A PORT ORANGE
PORT ORANGE, FL 32118

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: P () Delete
Name: LEFEBVRE, EDMOND B
Address: 5656 ISABELLE AVE 1A
City-St-Zip: PORT ORANGE, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ED LEFEBVRE

PRES

04/26/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date