## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000059961

Entity Name: WIREFORMS, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6767 COLLINS AVE 6767 COLLINS AVE

1804 1602

MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

6767 COLLINS AVE 6767 COLLINS AVE 1804 1602

1602

MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

FEI Number: 02-0615978 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUGGAL, GURPINDER
6767 COLLINS AVE
6767 COLLINS AVE
6767 COLLINS AVE

1804 1602 MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 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: GURPINDER DUGGAL 04/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition CFO ( ) Delete Title: CFO DUGGAL, GURPINDER DUGGAL, GURPINDER Name: Name: 6767 COLLINS AVE 6767 COLLINS AVE 1602 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141

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: GURPINDER DUGGAL CEO 04/14/2009