# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2005**
**Secretary of State**

DOCUMENT# P02000060969

**Entity Name:** NETWIRE, INC.

**Current Principal Place of Business:**

6984 SW 39TH STREET
H304
DAVIE, FL 33314

**New Principal Place of Business:**

6960 SW 39TH STREET
E101
DAVIE, FL 33314

**Current Mailing Address:**

6984 SW 39TH STREET
H304
DAVIE, FL 33314

**New Mailing Address:**

6960 SW 39TH STREET
E101
DAVIE, FL 33314

**FEI Number: 03-0440148** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LYONS, GREGORY F
6984 SW 39TH STREET
H304
DAVIE, FL 33314 US

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

LYONS, GREGORY F
6960 SW 39TH STREET
E101
DAVIE, FL 33314 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: _____ 05/01/2005

Electronic Signature of Registered Agent — Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PASC ( ) Delete
Name: LYONS, GREGORY F
Address: 6984 SW 39TH STREET
City-St-Zip: DAVIE, FL 33314

Title: D ( ) Delete
Name: LYONS, GREGORY F
Address: 6984 SW 39TH STREET
City-St-Zip: DAVIE, FL 33314

Title: VSTD ( ) Delete
Name: MAGGIO, VANESSA L
Address: 6984 SW 39TH STREET
City-St-Zip: DAVIE, FL 33314

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PASC (X) Change ( ) Addition
Name: LYONS, GREGORY F
Address: 6960 SW 39TH STREET, E101
City-St-Zip: DAVIE, FL 33314

Title: D (X) Change ( ) Addition
Name: LYONS, GREGORY F
Address: 6960 SW 39TH STREET, E101
City-St-Zip: DAVIE, FL 33314

Title: VSTD (X) Change ( ) Addition
Name: MAGGIO, VANESSA L
Address: 6960 SW 39TH STREET, E101
City-St-Zip: DAVIE, FL 33314

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: GREGORY F. LYONS PASC 05/01/2005

Electronic Signature of Signing Officer or Director — Date