2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085766

FILED Apr 13, 2005 Secretary of State

Entity Name: COASTAL CABLE ASSEMBLIES & COMPONENTS, INC.

Current Principal Place of Business:		New Principal Place of Business:				
UITE 161						
NDIAN HA	ARBOR DRIVE	E, FL 32937				
Current Mailing Address:		New Mailing Address:				
	ATRICK DRIVE	Ē				
SUITE 161 NDIAN HA	ARBOR DRIVE	E, FL 32937				
El Number	: 43-1970686	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()
ame and	Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:	
		Ē				
IDIAN HA		E, FL 32937 US	,			
NDIAN HA		E, FL 32937 US submits this statement for the	purpose of changing	ts registered	office or registered agent, or	both,
NDIAN HA	named entity e of Florida. RE:	submits this statement for the		ts registered	office or registered agent, or	both,
IDIAN HA he above the State	named entity e of Florida. RE:			ts registered	office or registered agent, or	both,
NDIAN HA he above the State	named entity e of Florida. RE: Electror	submits this statement for the		ts registered		both,
NDIAN HA he above the State GNATUI	named entity e of Florida. RE: Electror	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution ().	ent			
NDIAN HA The above The State Control Control	named entity e of Florida. RE: Electron mpaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). TORS:) Delete RESA M	ent	IS/CHANGE	Date	
NDIAN HA he above the State GNATUI	e named entity e of Florida. RE: Electron mpaign Financin S AND DIREC S (HUGHES, THE 2886 ROUEN A MELBOURNE,	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete RESA M AVE. FL 32935 Delete , JUDITH	ent ADDITION Title: Name: Address:	IS/CHANGE	Date S TO OFFICERS AND DIRECT () Change () Addition (X) Change () Addition TE, JUDITH NIA LANE	

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: JUDITH PERMANENTE V 04/13/2005