

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045876

Entity Name: WIRE SOLUTIONS, INC.

FILED
Feb 26, 2004
Secretary of State

Current Principal Place of Business:

494 MYRTICE RD
YULEE, FL 32097

New Principal Place of Business:

1445 W CHURCH STREET
JACKSONVILLE, FL 32204

Current Mailing Address:

494 MYRTICE RD
YULEE, FL 32097

New Mailing Address:

1445 W CHURCH STREET
JACKSONVILLE, FL 32204

FEI Number: 20-0197479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESSER, EDWIN
8853 SAN JOSE BLVD
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

THIGPEN, ROBIN R
1445 W CHURCH STREET
JACKSONVILLE, FL 32204 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: ROBIN R THIGPEN

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE () Change (X) Addition
Name: THIGPEN, ROBIN R
Address: 1445 W CHURCH STREET
City-St-Zip: JACKSONVILLE, FL 32204

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: ROBIN R THIGPEN

PRE

02/26/2004

Electronic Signature of Signing Officer or Director

Date