

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046291

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: HIGHWIRE ELECTRONICS INC.

**Current Principal Place of Business:**

4008 WINDELL PL.  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

4008 WINDELL PL.  
VALRICO, FL 33596 US

**New Mailing Address:**

FEI Number: 83-0354850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 US

**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: PTS ( ) Delete  
Name: REIFSCHNEIDER, STEVEN  
Address: 4008 WINDELL PL.  
City-St-Zip: VALRICO, FL 33594 US

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

Title: PTS (X) Change ( ) Addition  
Name: REIFSCHNEIDER, STEVEN  
Address: 4008 WINDELL PL.  
City-St-Zip: VALRICO, FL 33596 US

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: STEVE REIFSCHNEIDER

PRES

04/28/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date