

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16009

FILED
Mar 20, 2007
Secretary of State

Entity Name: AMERICAN INSULATED WIRE CORPORATION

Current Principal Place of Business:

260 FORBES BLVD
MANSFIELD, MA 02048 US

New Principal Place of Business:

Current Mailing Address:

260 FORBES BLVD
MANSFIELD, MA 02048 US

New Mailing Address:

FEI Number: 05-0097940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PRES () Delete
Name: WHEELER, ROBERT
Address: 260 FORBES BLVD
City-St-Zip: MANSFIELD, MA 02048

Title: CFO () Delete
Name: DEBIASI, RALPH
Address: 59-25 LITTLE NECK PKWY
City-St-Zip: LITTLE NECK, NY 11362

Title: SEC () Delete
Name: SOKOLOW, STEPHEN
Address: 59-25 LITTLE NECK PKWY
City-St-Zip: LITTLE NECK, NY 11362

Title: CEO () Delete
Name: LEVITON, HAROLD
Address: 59-25 LITTLE NECK PKWY
City-St-Zip: LITTLE NECK, NY 11362

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT WHEELER

PRES

03/20/2007

Electronic Signature of Signing Officer or Director

_____ Date