2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# P32467

Entity Name: PD WIRE & CABLE SALES CORPORATION

Current Principal Place of Business:

ONE NORTH CENTRAL AVENUE
PHOENIX, AZ 850044416

New Principal Place of Business:

Current Mailing Address:

ONE NORTH CENTRAL AVENUE
PHOENIX, AZ 850044416

New Mailing Address:

FEI Number: 13-2599195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: PD ( ) Delete
Name: MATHIAS, SANDOVAL F
Address: 806 DOUGLAS ROAD, STE 800
City-St-Zip: CORAL GABLES, FL 33134

Title: DSVP ( ) Delete
Name: COLTON, S D
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

Title: D ( ) Delete
Name: SNIDER, T R
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

Title: VP ( ) Delete
Name: DONAHUE, H O
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

Title: VPT ( ) Delete
Name: RIDEOUT, STANTON K
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

Title: TAXD ( ) Delete
Name: BAN, D A
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

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:

Title: T (X) Change ( ) Addition
Name: KINNEBERG, ERIC E
Address: ONE NORTH CENTRAL AVENUE
City-St-Zip: PHOENIX, AZ 850044416

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

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: HUGH O DONAHUE VPT 04/25/2007

Electronic Signature of Signing Officer or Director — Date