

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000076311

Entity Name: WIRING TECHNOLOGIES INC.

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

871 SUNSHINE LANE
105
ALTAMONTE SPRINGS, FL 32712 US

New Principal Place of Business:

871 SUNSHINE LANE
105
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

871 SUNSHINE LANE
105
ALTAMONTE SPRINGS, FL 328608335 US

New Mailing Address:

871 SUNSHINE LANE
105
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3278134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODEN, THOMAS A
1115 TUCKASEEGEE TR
MAITLAND, FL 32751 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: V () Delete
Name: COX, MICHAEL P
Address: 647 MAJESTIC OAK DRIVE
City-St-Zip: APOPKA, FL 32712

Title: P () Delete
Name: ODEN, THOMAS A.
Address: 1115 TUCKASEEGEE TR
City-St-Zip: MAITLAND, FL 32751

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COX, MICHAEL P
Address: 647 MAJESTIC OAK DRIVE
City-St-Zip: APOPKA, FL 32712

Title: V (X) Change () Addition
Name: ODEN, THOMAS A
Address: 1115 TUCKASEEGEE TR
City-St-Zip: MAITLAND, FL 32751

Title: T () Change (X) Addition
Name: MAGILL, ADAM T
Address: 940 LASCALA DR
City-St-Zip: WINDERMERE, FL 34786

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: ADAM T MAGILL

T

01/11/2007

Electronic Signature of Signing Officer or Director

Date