FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000084972 (5)

WIRING ASSOCIATES, INC.

Principal Place of Business 1937 WEST 76TH STREET

HIALEAH FL 33014

Mailing Address

1907 WEST 76TH STREET HIALEAH FL 33014-3269

FILED Apr 14 1997 8:00am Secretary of State



	·					3. Date Incorporated or Qualified 3a. Date of Last Report 11/03/1995 05/01/1996				
2. Principal I	Place of Business	2a. Mailing Addi	css			4. FLI Number			oplied For	
21		26				65-0631916			of Applicable	
Suite, Apt	l. #, etc.	Suite, Apt. #	etc.		**				Additional	
22		27				5. Certificate of Status Desired		Fee R	beriupe	
City & Sta	ile	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	F-1	Country		8. This corporation has liability for intangible tax under s. 199,032,				
24	25 29 30				· · · - · · · · · · · · · · · · · · · ·	Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent		B1		10. Name and Address of New Re	gistered A	gent		
ROSE, EDWIN G					81 Name					
	7 WEST 76TH STREET		82 Street Add			ress (P.O. Box Number is Not Acceptable)				
HIA	LEAH FL 33014									
ı : •				83					ļ	
i e t				84	City		FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and total if applicable. (NOTL Registered Agent a gnature required when reinstalling). DATE										
12.		JD DIRLCTORS		3.	ar a gribant requ	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
TITLE	VTD	Di	LETE 1.	1 TITLE	Т			Change	Addition	
NAME	ROSE, EDWIN G		B	2 NAME					1	
STREET ADDRESS	300 S.W. 167TH AVE.			-	ADDRESS					
CITY - ST - ZIP	PEMBROKE PINES FL 33027			4 Cily-S						
TITLE	PSD	Di		1 TITLE				Change	Addition	
NAME	MANALIO, KEITH		2.3	2 NAME	ļ				j	
STREET ADDRESS	2420 S.W. 87TH AVE.		2.3 \$1		ADDRESS	•	•		ĺ	
CITY-ST-ZIP	MIRAMAR FL 33025		2.40		1 - ZIP					
TITLE		[] DE	IFIE 3.	1 TEILE				Change	Addition	
NAME	1		3.3	2 NAME					ł	
STREET ADDRESS			3.3	3 STREET	ADDRESS					
CITY-ST-ZIP			3.	4. 0:TY-5	1- Z (P				ì	
TITLE		DE		1 HTLF				Change	Addition	
NAME	1		4.	2 NAME						
STREET ADDRESS	1		4.3	3 STREET	ADDRESS)	
CITY-ST-ZIP			4.4	4 CITY - S	1 - ZIP					
TITLE		DE	IETE 5	THEF				Change	Addition	
NAME			5.2	2 NAME	1				}	
STREET ADDRESS			5.3	3 STREET	ADDRESS				J	
CITY-ST-ZIP			5.4	CITY-S	- 21P					
TITLE		DE	IEIL 6	1 TITLE				Change	Addition	
NAME			63	2 NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					
CITY-ST-ZIP	1		6.4	4 CITY - ST	1- 21P					
14. I do here	by certify that the information supplie	d with this filing does i	not qualify for the	ie exei	nution state	d in Section 119.07(3)(i), Florida Statutes	. I further	certify that	the	
informatio	on indicated on this annual report or s	supplemental annual re	eport is true an	d accu	rate and tha	t my signature shall have the same legal	effect as	if made un	der eath; that	