2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001129

3382 BARTLETT BLVD

ORLANDO, FL 32811

Address:

City-St-Zip:

Entity Name: WIRELESS TECHNOLOGY EQUIPMENT COMPANY, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			Navy Buinaina	New Principal Place of Pusings		
Current Pr	incipai Pia	ice of Business:	New Principa	New Principal Place of Business:		
3382 BART ORLANDO,		D.				
Current Mailing Address:			New Mailing	New Mailing Address:		
P.O. BOX 618036 ORLANDO, FL 328618036						
FEI Number:	59-3352849	FEI Number Applied For()	FEI Number Not Applicab	ole ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
PARRISH, I				PARRISH, DOUGLAS D CEO		
3382 BARTLETT BLVD ORLANDO, FL 32811 US				3382 BARTLETT BLVD ORLANDO, FL 32811 US		
ORLANDO,	FL 32011	US	ORLANDO, FL	_ 32011	US	
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: D. D. PARRISH 03/23/2009						
	Electi	ronic Signature of Registered Agent			Date	
Election Cam	paign Finand	cing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	CT	() Delete	Title: CT	(X)	Change () Addition	
Name:		OUGLAS D SR.		ARRISH SR, D		
Address:	3382 BARTL			3382 BARTLETT BLVD ORLANDO, FL 32811		
City-St-Zip:	ORLANDO, I	FL 32811	City-St-Zip: OF	KLANDO, FL 、	32811	
Title:	Р	() Delete	Title:	()	Change () Addition	
Name:	SCHULIST,	JEROME S	Name:			
Address:	3382 BARTL		Address:			
City-St-Zip:	ORLANDO, I	FL 32811	City-St-Zip:			
Title:	V	() Delete	Title: V	(X)	Change () Addition	
Name:	PARRISH, D		Name: PA	ARRISH, DÒŃ	- · · ·	
Address:	1718 S COM	IBEE RD	Address: 33	82 BARTLETT	BLVD	
City-St-Zip:	LAKELAND,	FL 33801	City-St-Zip: OF	RLANDO, FL	32811	
Title: Name:	DS KETZNER. V	()Delete VENDY L	Title: Name:	()	Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: WENDY L KETZNER DS 03/23/2009