

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000017413

**Entity Name:** TECHNOCABLE WIRING SPECIALIST, INC.

**Current Principal Place of Business:**

6200 BORDEAUX CIR  
SANFORD, FL 32771

**Current Mailing Address:**

3110 CHERRY PALM DR.  
SUITE 380  
TAMPA, FL 33619 US

**FEI Number:** 59-3628062

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SILVA, ALINE  
6200 BORDEAUX CIR.  
SANFORD, FL 32771 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SILVA, HUMBERTO  
Address        6200 BORDEAUX CIR.  
City-State-Zip: SANFORD FL 32771

Title            VP  
Name            SILVA, ALINE  
Address        6200 BORDEAUX CIR.  
City-State-Zip: SANFORD FL 32771

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALINE SILVA

**OFFICER**

**03/22/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date