

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065473

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** HW SOFTWARE ARCHITECTS, INC.

**Current Principal Place of Business:**

3051 NW OVERLOOK DRIVE  
APT 1237  
HILLSBORO, OR 97124 US

**New Principal Place of Business:**

1127 BROADWAY ST NE  
APT 414  
SALEM, OR 97301 US

**Current Mailing Address:**

3051 NW OVERLOOK DRIVE  
APT 1237  
HILLSBORO, OR 97124 US

**New Mailing Address:**

1127 BROADWAY ST NE  
APT 414  
SALEM, OR 97301 US

**FEI Number:** 26-0291278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST. SUITE 500  
ORLANDO, FL 32804 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: PVST  
Name: SARA KIKYA, HAGGAI  
Address: 1127 BROADWAY ST NE APT 414  
City-St-Zip: SALEM, OR 97301 US

Title: D  
Name: SARA KIKYA, HAGGAI  
Address: 1127 BROADWAY ST NE APT 414  
City-St-Zip: SALEM, OR 97301 US

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: HAGGAI W SARA KIKYA

PVST

03/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date