

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000077667

**Entity Name:** FABRICATED WIRE PRODUCTS, INC.

**Current Principal Place of Business:**

2004 N DOVER RD  
DOVER, FL 33527

**Current Mailing Address:**

PO BOX 671  
DOVER, FL 33527 US

**FEI Number:** 47-1913056

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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 P, D  
Name BYRD, CHAD L  
Address 2004 N DOVER RD  
City-State-Zip: DOVER FL 33527

Title S, T  
Name BYRD, CHAD L  
Address 2004 N DOVER RD  
City-State-Zip: DOVER FL 33527

*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:** CHAD L BYRD

**OWNER**

**03/11/2024**

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

\_\_\_\_\_  
Date