

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

FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 337611 (8)
1. Corporation Name
HANDY & HARMAN ELECTRONIC MATERIALS CORPORATION

Principal Place of Business 72 ELM STREET NORTH ATTLEBORO MA 02760 US	Mailing Address 72 ELM STREET NORTH ATTLEBORO MA 02760 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/13/1968	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1223979	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

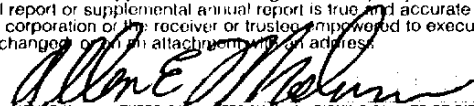
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

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 fee if applicable) (NOT: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COB	1.1 TITLE	☐ Change ☐ Addition
NAME	GRZELECKI, FRANK	1.2 NAME	
STREET ADDRESS	312 GREENLEY ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW CANAAN CT	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	☐ Change ☐ Addition
NAME	MOLVAR, ALLEN	2.2 NAME	
STREET ADDRESS	10 MATHEWSON LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON RI	2.4 CITY-ST-ZIP	
TITLE	VPT	3.1 TITLE	☒ Change ☐ Addition
NAME	MUDD, STEVE B	3.2 NAME	
STREET ADDRESS	56 MEADOWBROOK ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WHITE PLAINS NY	3.4 CITY-ST-ZIP	
TITLE	VPS	4.1 TITLE	☐ Change ☐ Addition
NAME	DIXON, PAUL	4.2 NAME	
STREET ADDRESS	POUND RIDGE ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEDFORD NY	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☒ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment, and an address.

SIGNATURE: 

CR2E034 (10/97)