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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name 580104

(8)

SEMICONDUCTOR TECHNOLOGY, INC.

FILED

Apr 16 1998 8:00am

Secretary of State

			,									
Principal Place of Business Mailing Address									- 3 1800 101 101064 10164 00100 11001 00811 0168	EIEN DIDN BIL	AF BIBIA BU)
3191 SOUTH EAST JAY STREET				3131 SOUTH EAST JAY STREET								
STUART FL 34997-5964				STUART FL 34997-5984								
									DO NOT WRITE	IN THIS SPA	ACE	
									3. Date Incorporated or Qualified 07/25/1978			,
2. Principal Pl	ace of Busi	2a. Ma	2a. Mailing Address				4. FEI Number		T A	pplied For		
21			26	26				11-2236783		N	lot Applicable	
Suite, Apt.	#, etc.	Su	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional		
22		27	·				6. Certificate of Status Desired		Fee R	lequired		
City & State	ə	Cit	City & State				6. Election Campaign Financing		\$5.00	May Be		
23			28						Trust Fund Contribution		Added	to Fees
Zıp	Country		Zip	 		Country			8. This corporation owes or has paid	d the currer	ıt year Ir	ntangible
24	25		29			0			Personal Property Tax due June :			□ No
		and Address of Curi	ent Registere						10. Name and Address of New Reg	istered Ag	ent	
	gel, frei					81	Name					
3131 SOUTH EAST JAY STREET						82	Street	Addre	iss (P.O. Box Number is Not Acceptable)			
STU	Jart FL 3		"						~,			
						84	City			FL	85 Zip	Code
11. Pyrsuant t	sions of Sections 607.0	502 and 607.1	508, Florida Statu	tes, the	above	-named	corpo	ration submits this statement for the pu	rpose of ch	anging	its registered	
office of re	egistered a(m familiar w	gent, or both, in the Sta ith, and accept the ch	ite of Florida 3	Such change was ection 607 0505, FI	authoriz orida St	ed by	the corp	oratio	ration submits this statement for the pu on's board of directors. I hereby accept	the appoin	tment as	s registered
		and and accopt the co	.ga,.o		Onda Di	a o o	,					
SIGNATURE	Signature, typic	d or printed name of registered	sgent and title d ap	plicable. (NOI	TE Registe	red Age	nt signature	required	1 when reinstating)	DATE	-	
12.		OFFICERS A	ND DIRECTO	RS	13	١.			ADDITIONS/CHANGES TO OFFICE	ERS AND D	IRECTO	RS IN 12
THLE	DV		•	DELETE		1.1 TITLE					Change	Addition
NAME	AIVAZIAN, DIRAN G					1.2 NAME						
STREET ADDRESS				1.3 :			1.3 STREET ADDRESS					
CITY-ST-ZIP	STUAR	f, FL 00000			1.4	CITY-S	T-ZIP					
TITLE	PD			DELETE		TITLE					Change	☐ Addition
NAME	SEIGEL	, fred G			2.2	NAME						
STREET ADDRESS	3131 S E JAY STREET				2.3	2.3 STREET ADDRESS						
CITY-ST-ZIP	STUARI	Γ, FL 00000			2.4	CITY-S	1-71P					
TITLE				DELETE		TITLE			···		Change	Addition
NAME					3.2	NAME					-	
STREET ADDRESS					3.3	STREET	ADDRESS					
CITY - ST - ZIP						CITY-S						
TITLE				DELETE	_	TITLE					Change	Addition
NAME						NAME						_
STREET ADDRESS	s]						ADDRESS					
CITY-SI-ZIP						CITY-ST						
TITLE				DELETE		TITLE	,		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME					1	NAME	1					
STREET ADDRESS							ADORESS					
1							I					
City-St-ZiP Title			·	DELETE		CITY-SI TITLE	I - ZIP				Change	Addition
NAME				_ >====================================			l			_	O HOUSE	
į.						NAME	*DD00500					J
STREET ADDRESS					6.3	ointti	ADDRESS					

14. Thereby certify that the information supplied with his 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 cath, that I am an officer or director of the corporation or life receiving a 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 on an attacking with an address.

x 1/25/98

561-283-4500