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Apr 03 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 # 845399 (5)

1. Corporation Name
TANDEM COMPUTERS INCORPORATED



Principal Place of Business 10435 N. TANTAU AVE CUPERTINO CA 95014 US	Mailing Address 10435 N. TANTUA AVE <i>LOC 200-17</i> CUPERTINO CA 95014 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/05/1980	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 94-2266618	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	PIEPER, ROEL PESATORI, ENRICO	
STREET ADDRESS	19333 VALLCO PARKWAY	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	BARBER, KENNETH R	
STREET ADDRESS	19333 VALLCO PARKWAY	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	DOGGETT, ERIC L	
STREET ADDRESS	19333 VALLCO PARKWAY	
CITY-ST-ZIP	SAN JOSE CA	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	FRIEDRICH, KURT L	
STREET ADDRESS	19333 VALLCO PARKWAY	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PARRY, JOSEPHINE T	
STREET ADDRESS	19333 VALLCO PARKWAY	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	STOECKER, GREG	
STREET ADDRESS	19333 VALLCO PKWY	
CITY-ST-ZIP	CUPERTINO CA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SVP
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	HEIL, WILLIAM W.
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	SVP
6.3 STREET ADDRESS	NIST, PAULINE A
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 on an attachment with an address.

SIGNATURE: *[Signature]* **JOSEPHINE PARRY** **3/23/98** **(104)285-4582**

CR2E034 (10/97)