## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000001405

Entity Name: ARTESYN COMMUNICATION PRODUCTS, INC.

FILED May 16, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
8310 EXCELSIOR DRIVE MADISON, FL 53717				5810 VAN ALLEN WAY CARLSBAD, CA 92008		
Current Mailing Address:				New Mailing Address:		
8310 EXCELSIOR DRIVE MADISON, FL 53717				5810 VAN ALLEN WAY CARLSBAD, CA 92008		
FEI Number:	39-1715857	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( ) C	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:		Name and	Address of Nev	w Registered Agent:
% CT COR 1200 SOU <sup>-</sup> PLANTATI	ORATION SYST RPORATION SY TH PINE ISLAN ON, FL 33324	YSTEM ID ROAD US				
	named entity s of Florida.	ubmits this statement for the pu	rpose of	changing it	s registered offic	ce or registered agent, or both,
SIGNATUF	RE:					
	Electroni	c Signature of Registered Agen	ıt			Date
Election Can		(2)(b), F.S., the corporation did not Trust Fund Contribution ( ). FORS:				O OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	O'DONNELL, JO 7900 GLADES R BOCA RATON, F	ROAD, SUITE 500 FL 33434 Delete OTT DR DRIVE		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	ROSENAST, THOI 5810 VAN ALLEN CARLSBAD, CA S	WAY 22008 hange ( ) Addition TT WAY
Title: Name: Address: City-St-Zip:	LARSEN, GARY	ROAD, SUITE 500		Title: Name: Address: City-St-Zip:	D (X) C SUNG, RICHARD 5810 VAN ALLEN CARLSBAD, CA	WAY
Title: Name: Address: City-St-Zip:	T () GERRITY, RICH 7900 GLADES F BOCA RATON, F	ARD F ROAD, SUITE 500		Title: Name: Address: City-St-Zip:	T (X) C DITTMER, BRUCE 5810 VAN ALLEN CARLSBAD, CA	E WAY
Title: Name: Address: City-St-Zip:	LIBOW, DAVID I	ROAD, SUITE 500		Title: Name: Address: City-St-Zip:	AS (X) C MOON, DAVID C 5810 VAN ALLEN CARLSBAD, CA	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () CI BAKER, ANDY 5810 VAN ALLEN CARLSBAD, CA	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS ROSENAST D 05/16/2007