## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # F9900000544 HASKELL CONSTRUCTORS, INC. 04-30-2001 90085 006 \*\*\*150.00 Principal Place of Business Mailing Address 175 TECHNOLOGY DRIVE 175 TECHNOLOGY DRIVE IRVINE CA 92618 IRVINE CA 92618 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 33-0667125 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VICE President Secretary TITLE 🗡 Delete Change VOSS, MICHAEL Allen Scott Stuller NAME NAME STREET ADDRESS 175 TECHNOLOGY DRIVE 175 Technology Or. STREET ADDRESS CITY-ST-ZIP IRVINE CA 92618 CITY-ST-ZIP Irvne on 92418 TITLE Delete VICE Prosident Treasurer TITLE ☐ Change Addition HIGUCHI, SHINJI Hans Cerhard+ Tanzler III NAME NAMÉ 175 TECHNOLOGY DRIVE STREET ADDRESS STREET ADDRESS 111 Riverside Ave CITY-ST-ZIP **IRVINE CA 92618** CITY - ST - ZIP CLSONVILLE FL 32202 1011.5 ☐ Delete TITLE ☐ Chance Addit on SCHAFER, ALBERT NAME ΝΑΜΕ STREET ADDRESS 175 TECHNOLOGY DRIVE STREET ADDRESS CITY-ST-ZIP **IRVINE CA 92618** CITY-ST-ZIP TITLE 🗶 Delete TITLE ☐ Change Addition KEMP, DALE A. NAME NAME 175 TECHNOLOGY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVINE CA 92618** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition: NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

MAME STREET ADDRESS

CITY-ST-7IP