## **2003 FOR PROFIT CORPORATION**

## UNIFORM BUSINESS REPORT (UBR) F98000001601 **DOCUMENT#**

**FILED** Mar 03, 2003 8:00 am Secretary of State

ALCATE		PORT AUTOMAT	TION (U.S	S.), INC.	-				03-03-200	3 90494	034 ***1:	50.00	
Principal Place of Business 5700 CORPORATE DR STE 300 PITTSBURGH PA 15237			5700 STE	Mailing Address 5700 CORPORATE DR STE 300 PITTSBURGH PA 15237					10030		1 <b>8</b> 111 <b>68</b> 181 (1818	81174 88784 1184 1884	
2. Principal	Place of Busi	ness	3. Ma	iling Address			$\dashv$						
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City	City & State			4.	4. FEI Number 13-3706888 Applie				Applied For	
Zip		Country	Zip		Coun	itry	5. (	Certificate of	Status Desire	·		Not Applicable Additional	
	6. Name	and Address of Curre	ent Register	ed Agent	<u> </u>	<u> </u>	7 1	Name and A	ddrago of No.	Danista	Fee Req	uirea	
						Name	7. 1	valle and Ad	ddress of Nev	w Hegister	ea Agent		
C T COP	RPORATION	SYSTEM				i vaing							
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324						Street Address (P.O. Box Number is Not Acceptable)							
PLANIAI	HON FL 333	24				City	<del></del> -		····		<b>70</b> 70 70		
	<del> </del>					·					Zip C		
8. The above	e named entity	y submits this statement	t for the purp	ose of changing its	registere	ed office or regis	stered age	ent, or both, i	n the State of	Florida, L	am familiar w	ith and accent	
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SIGNATURE													
SIGNATURE		or printed name of registered ag	ent and title if app	licable. (NOTE	: Registered	Agent signature requ	uired when re	instating)		DA			
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I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

