

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

FILED
May 13 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 # **819035** (7)
1. Corporation Name
WYLE ELECTRONICS, INC.



Principal Place of Business
**15370 BARRANCA PKWY
IRVINE CA 92718
US**

Mailing Address
**P.O. BOX 19675
IRVINE CA 92623-9675
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/22/1965	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 95-1779998	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	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		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), 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 607.05(5), Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCEO	1.1 TITLE	PCEO
NAME	OZORKIEWICZ, RALPH L.	1.2 NAME	Michael J. Rohleder
STREET ADDRESS	15370 BARRANCA PKWY	1.3 STREET ADDRESS	15370 Barranca Parkway
CITY-ST-ZIP	IRVINE CA	1.4 CITY-ST-ZIP	Irvine, CA 92718
TITLE	EVPT	2.1 TITLE	
NAME	HOLLAND JR., R VAN NESS	2.2 NAME	
STREET ADDRESS	15370 BARRANCA PKWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	IRVINE CA	2.4 CITY-ST-ZIP	
TITLE	SVPA	3.1 TITLE	
NAME	NATCHER, STEPHEN D	3.2 NAME	
STREET ADDRESS	15370 BARRANCA PKWY	3.3 STREET ADDRESS	
CITY-ST-ZIP	IRVINE CA	3.4 CITY-ST-ZIP	
TITLE	C	4.1 TITLE	D
NAME	CLOUGH, CHARLES M.	4.2 NAME	Gunther Beuth
STREET ADDRESS	15370 BARRANCA PKWY	4.3 STREET ADDRESS	15370 Barranca Parkway
CITY-ST-ZIP	IRVINE CA	4.4 CITY-ST-ZIP	Irvine, CA 92718
TITLE	D	5.1 TITLE	D
NAME	WYLE, FRANK S	5.2 NAME	Dr. Ferdinand Pohl
STREET ADDRESS	15370 BARRANCA PKWY	5.3 STREET ADDRESS	15370 Barranca Parkway
CITY-ST-ZIP	IRVINE CA	5.4 CITY-ST-ZIP	Irvine, CA 92718
TITLE	D	6.1 TITLE	D
NAME	WAINER, STANLEY A	6.2 NAME	Michael J. Rohleder
STREET ADDRESS	15370 BARRANCA PKWY	6.3 STREET ADDRESS	15370 Barranca Parkway
CITY-ST-ZIP	IRVINE CA	6.4 CITY-ST-ZIP	Irvine, CA 92718

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: _____

APR 28 1998

(949) 753-9953

CR2E034 (10/97)