

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002320

Entity Name: ALVARION, INC.

FILED  
May 16, 2006  
Secretary of State

## Current Principal Place of Business:

510 SHOTGUN RD. SUITE 110  
SUNRISE, FL 33325

## New Principal Place of Business:

2495 LEGHORN STREET  
MOUNTAIN VIEW, CA 94043

## Current Mailing Address:

510 SHOTGUN RD. SUITE 110  
SUNRISE, FL 33325

## New Mailing Address:

2495 LEGHORN STREET  
MOUNTAIN VIEW, CA 94043

FEI Number: 33-0674623

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLAUDIO NIJAMKIN  
510 SHOTGUN RD SUITE 110  
SUNRISE, FL 33325 US

## Name and Address of New Registered Agent:

ROSENZWEIG, AMIR CEO  
2495 LEGHORN STREET  
MOUNTAIN VIEW, FL 94303 US

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: ROSENZWEIG, AMIR

05/16/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: SLONIMSKY, ZVI  
Address: 21A HABARZEL STREET  
City-St-Zip: TEL AVIV, ISRAEL 69710,

Title: DP ( ) Delete  
Name: ROSENZWEIG, AMIR  
Address: 5858 EDISON PLACE  
City-St-Zip: CARLSBAD, CA 92008

Title: V (X) Delete  
Name: BENNETT, AARON  
Address: 5858 EDISON PLACE  
City-St-Zip: CARLSBAD, CA 92008

Title: V (X) Delete  
Name: YAARI, IGALN  
Address: 5858 EDISON PLACE  
City-St-Zip: CARLSBAD, CA 92008

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: ROSENZWEIG, AMIR  
Address: 2495 LEGHORN STREET  
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: VP (X) Change ( ) Addition  
Name: BENNETT, AARON  
Address: 2495 LEGHORN STREET  
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: AMIR ROSENZWEIG

CEO

05/16/2006

Electronic Signature of Signing Officer or Director

Date