2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2008 08:00 AM
Secretary of State

DOCUMENT # F05000007558

1. Entity Name
SANMINA-SCI USA, INC.

Principal Place of Business	Mailing Address
2700 NORTH FIRST STREET SAN JOSE, CA 95134	30 E PLUMERIA DRIVE SAN JOSE, CA 95134

DO NOT WRITE IN THIS SPACE

01162008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-3510117
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CEOP
NAME	SOLA, JURE
STREET ADDRESS	30 E PLUMERIA DRIVE
CITY-ST-ZIP	SAN JOSE, CA 95134
TITLE	S
NAME	JACKMAN, STEVEN
STREET ADDRESS	30 E PLUMERIA DRIVE
CITY-ST-ZIP	SAN JOSE, CA 95134
TITLE	CFO
NAME	WHITE, DAVID
STREET ADDRESS	30 E PLUMERIA DRIVE
CITY-ST-ZIP	SAN JOSE, CA 95134
TITLE	AS
NAME	BYERS, SHELLY L
STREET ADDRESS	13000 SOUTH MEMORIAL PARKWAY
CITY-ST-ZIP	HUNTSVILLE, AL 35803
TITLE	T
NAME	BOILEAU, WALTER
STREET ADDRESS	30 E PLUMERIA DRIVE
CITY-ST-ZIP	SAN JOSE, CA 95134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/28/08-80012-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Shelly L. Byers 23 Jan. 2008 (256)882-4800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #