


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2006 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F93000003743</b> 1. Entity Name ARRIS INTERNATIONAL, INC.		
Principal Place of Business 3871 LAKEFIELD DRIVE SUWANEE, GA 30024	Mailing Address 3871 LAKEFIELD DRIVE SUWANEE, GA 30024	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STANZIONE, ROBERT J 3871 LAKEFIELD DRIVE SUWANEE, GA 30024	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP POTTS, DAVID 3871 LAKEFIELD DR. SUWANEE, GA 30024	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP MARGOLIS, LAWRENCE 3871 LAKEFIELD DRIVE SUWANEE, GA 30024	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCPHEE, GREGG 3871 LAKEFIELD DR. SUWANEE, GA 30024	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>Gregg M. McPhee</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/25/06</u> <u>678-473-2000</u> <small>Date Daytime Phone #</small>



04252006 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3892082	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

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05/17/06-80131-017 150.00

**DO NOT WRITE  
IN THIS SPACE**