

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

FILED  
Jan 27 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 # F93000004999 (9)

1. Corporation Name

QUICKTURN DESIGN SYSTEMS, INC.

Principal Place of Business

55 W. TRIMBLE ROAD  
SAN JOSE CA 95131-1013

Mailing Address

55 W. TRIMBLE ROAD  
SAN JOSE CA 95131-1013

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1993

4. FEI Number

77-0159619

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

C  
NAME ANGLE, GLEN M  
STREET ADDRESS 440 CLYDE AVE  
CITY-ST-ZIP MOUNTAIN VIEW CA

TITLE ☐ DELETE

PC  
NAME LOBO, KEITH R  
STREET ADDRESS 440 CLYDE AVE  
CITY-ST-ZIP MOUNTAIN VIEW CA

TITLE ☐ DELETE

VD  
NAME HUANG, PAUL  
STREET ADDRESS 440 CLYDE AVE  
CITY-ST-ZIP MOUNTAIN VIEW CA

TITLE ☐ DELETE

V  
NAME NAEEM, ZAFAR  
STREET ADDRESS 440 CLYDE AVE  
CITY-ST-ZIP LOS ALTOS CA

TITLE ☐ DELETE

VS  
NAME OSTBY, RAYMOND K  
STREET ADDRESS 440 CLYDE AVE  
CITY-ST-ZIP MOUNTAIN VIEW CA

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

C  
1.2 NAME Antle, Glen M  
1.3 STREET ADDRESS 55 West Trimble Road  
1.4 CITY-ST-ZIP San Jose, CA 95131

2.1 TITLE ☒ Change ☐ Addition

DP  
2.2 NAME Lobo, Keith R  
2.3 STREET ADDRESS 55 West Trimble Road  
2.4 CITY-ST-ZIP San Jose, CA 95131

3.1 TITLE ☒ Change ☐ Addition

D  
3.2 NAME Huang, Paul  
3.3 STREET ADDRESS 55 West Trimble Road  
3.4 CITY-ST-ZIP San Jose, CA 95131

4.1 TITLE ☒ Change ☐ Addition

V  
4.2 NAME Zafar, Naeem  
4.3 STREET ADDRESS 55 West Trimble Road  
4.4 CITY-ST-ZIP San Jose, CA 95131

5.1 TITLE ☒ Change ☐ Addition

VS  
5.2 NAME Ostby, Raymond K  
5.3 STREET ADDRESS 55 West Trimble Road  
5.4 CITY-ST-ZIP San Jose, CA 95131

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

Raymond K. Ostby

01/15/98

(408)914-6000

CR2E034 (10/97)