


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2007 8:00 am**  
**Secretary of State**

02-19-2007 90054 017 \*\*\*150.00

<b>DOCUMENT # F94000003734</b>	
1. Entity Name <b>TELEDYNE ADVANCED POLLUTION INSTRUMENTATION, INC.</b>	

Principal Place of Business <b>16830 CHESTNUT STREET CITY OF INDUSTRY, CA 91748</b>	Mailing Address <b>12333 W. OLYMPIC BLVD. LOS ANGELES, CA 90064</b>
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**40020160**



2. Principal Place of Business - No P.O. Box # <b>9480 Carroll Park Drive</b>	3. Mailing Address <b>1049 Camino Dos Rios</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01082007 Chg-P CR2E034 (12/06)

City & State <b>San Diego, CA 92121</b>	City & State <b>Thousand Oaks, CA</b>
Zip <b>92121</b>	Country <b>USA</b>
Country <b>USA</b>	Zip <b>91360</b>
Country <b>USA</b>	Country <b>USA</b>

4. FEI Number <b>33-0387046</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>NATIONAL CORPORATE RESEARCH, LTD., INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CCEO MEHRABIAN, ROBERT 12333 W OLYMPIC BLVD LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Please see Attachment "A" for complete list of officers and directors.</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCFO SCHNITTER, DALE 12333 W. OLYMPIC BLVD. LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P PICHELLI, ALDO 12333 W. OLYMPIC BLVD. LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VAAS MCGOWAN, ROBYN E 12333 W. OLYMPIC BLVD. LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPAS CIBIK, MELANIE S 12333 W OLYMPIC BLVD LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T GREEN, SHELLEY D 12333 W OLYMPIC BLVD LOS ANGELES, CA 90064</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: Melanie S. Cibik **1/12/2007** (310) 893-1600  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Melanie S. Cibik, Vice President, Assoc. General Counsel & Asst. Sec.**