

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F95000004016					
1. Entity Name SIEMENS WESTINGHOUSE OPERATING SERVICES COMPANY					
Principal Place of Business 4400 ALAFAYA TRAIL ORLANDO, FL 32826			Mailing Address C/O SIEMENS CORPORATION 186 WOOD AVENUE ISELIN, NJ 08830		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address c/o Siemens Corporation Suite, Apt. #, etc. 170 Wood Avenue South			
City & State Orlando, FL		City & State Iselin, NJ		4. FEI Number 52-1715538	
Zip 32826		Zip 08830		Country USA	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's consent required when requesting.)</small>					
FILE NOW! FEE IS \$150.00 After May 15, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE AS NAME READER, RUSSELL B STREET ADDRESS 4400 ALAFAYA TRAIL CITY-ST-ZIP ORLANDO, FL 32826	<input type="checkbox"/> Delete		TITLE NAME Director Louis Zaltsberg STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME ARTINGER, R.F. STREET ADDRESS 4400 ALAFAYA TRAIL CITY-ST-ZIP ORLANDO, FL 32826	<input checked="" type="checkbox"/> Delete		TITLE NAME VP/Treasurer Harry W. Zike STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE DP NAME JOHNSON, D. M. STREET ADDRESS 4400 ALAFAYA TRAIL CITY-ST-ZIP ORLANDO, FL 32826	<input type="checkbox"/> Delete		TITLE NAME VP/Treasurer Harry W. Zike STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VP NAME CRAIG, PHILIP A STREET ADDRESS 1000 DEERFIELD PARKWAY CITY-ST-ZIP BUFFALO GROVE, IL 60089	<input type="checkbox"/> Delete		TITLE NAME VP/Treasurer Harry W. Zike STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE S NAME BROWN, SUSAN STREET ADDRESS 4400 ALAFAYA TRAIL CITY-ST-ZIP ORLANDO, FL 32826	<input checked="" type="checkbox"/> Delete		TITLE NAME VP/Treasurer Harry W. Zike STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE AS NAME POMPETZKI, GEORGE STREET ADDRESS 186 WOOD AVENUE SOUTH CITY-ST-ZIP ISELIN, NJ 08830	<input type="checkbox"/> Delete		TITLE NAME VP/Treasurer Harry W. Zike STREET ADDRESS 4400 Alafaya Trail CITY-ST-ZIP Orlando, FL 32826	<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 exemption stated in Section 119.07(3)(i), 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>George Pompetzki</u> George Pompetzki, Assistant Secretary 3/27/03					

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CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)