

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

**FILED**  
**May 15 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F96000005694 (2)**  
 1. Corporation Name  
**RACAL ELECTRONICS INC.**



Principal Place of Business <b>1601 N HARRISON PKWY SUNRISE FL 33323</b>	Mailing Address <b>1601 N HARRISON PKWY SUNRISE FL 33323</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>11/01/1996</b>	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number <b>59-1785140</b>	Applied For Not Applicable
23 Zip	25 Country	28 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>FILED</i>	

9. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>				10. Name and Address of New Registered Agent <i>UNDER-RACAL ELEC</i>	
				81 Name	<b>INC + 8485 59-1785140</b>
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	<b>FL</b>
				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DVT</b>	1.1 TITLE	<b>DOT</b>
NAME	<b>WOOD, ANDREW R</b>	1.2 NAME	<b>ANDREW WOOD</b>
STREET ADDRESS	<b>GROVES BROOK, GOUGH RD, FLEET, HANTS</b>	1.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>GU13 8LJ ENGLAND</b>	1.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>
TITLE	<b>DP</b>	2.1 TITLE	<b>T</b>
NAME	<b>BLECKNER, EDWARD JR</b>	2.2 NAME	<b>WILLIAM DIAZ</b>
STREET ADDRESS	<b>1641 SE 7TH ST</b>	2.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>	2.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>
TITLE	<b>D</b>	3.1 TITLE	<b>D</b>
NAME	<b>KOZLOWSKI, PAUL G</b>	3.2 NAME	<b>PAUL KOZLOWSKI</b>
STREET ADDRESS	<b>5100 N OCEAN BLVD #1009</b>	3.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>FT LAUDERDALE FL 33308</b>	3.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>
TITLE	<b>AT</b>	4.1 TITLE	<b>AT</b>
NAME	<b>BOWIE, DAVID A</b>	4.2 NAME	<b>FRANCES FINGERROOT</b>
STREET ADDRESS	<b>3478 SOUTHWOOD CT</b>	4.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>DAVIE FL</b>	4.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>
TITLE	<b>S</b>	5.1 TITLE	<b>S</b>
NAME	<b>CAMPOS, DELFINA R</b>	5.2 NAME	<b>ROD MANNING</b>
STREET ADDRESS	<b>770 NW 29TH AVE</b>	5.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>MIAMI FL 33125</b>	5.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>
TITLE	<b>AS</b>	6.1 TITLE	<b>AT</b>
NAME	<b>CARPENTER, JOSEPH E JR</b>	6.2 NAME	<b>SCOTT MYOTT</b>
STREET ADDRESS	<b>301 NW 131 AVE</b>	6.3 STREET ADDRESS	<b>1601 HARRISON PKWY</b>
CITY-ST-ZIP	<b>PLANTATION FL</b>	6.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>

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: *Scott Myott* **SCOTT MYOTT** 4/14/98 9548464166

CR2E034 (10/97)