

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

FILED
May 12 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 # **F97000004683 (5)**
1. Corporation Name
WESTERN MULTIPLEX CORPORATION



Principal Place of Business 1196 BORREGAS AVE SUNNYVALE CA 94089	Mailing Address 1196 BORREGAS AVE SUNNYVALE CA 94089
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/08/1997	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 94-2620670		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, GARY B	1.2 NAME	
STREET ADDRESS	18401 PENINSULA CLUB	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORNELIUS NC	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRESHAM, MICHAEL J	2.2 NAME	
STREET ADDRESS	91 WATERSIDE CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	REDWOOD CITY CA	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZOUFONOUN, AMIR	3.2 NAME	
STREET ADDRESS	887 N CENTRAL AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAMPBELL CA	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CIEPCIELINSKI, STANLEY	4.2 NAME	
STREET ADDRESS	632 STANHOPE LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MATTHEWS NC	4.4 CITY-ST-ZIP	
TITLE	SD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRIDGEN, EUGENE C	5.2 NAME	
STREET ADDRESS	5935 CARNEGIE BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAYTON, BILLY C	6.2 NAME	
STREET ADDRESS	5935 CARNEGIE BLVD	6.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC	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:

[Signature] J.N. Pistor Acct Sec

4/28/98

(408) 572-5225

CR2E034 (10/97)



WIRELESS INTERCONNECT

WESTERN MULTIPLEX

1196 Borregas Avenue, Sunnyvale, CA 94089-1302
(408) 542-5200 • Fax: (408) 542-5300

WESTERN MULTIPLEX CORPORATION

OFFICERS

NAMES	TITLE	DATE	SSN	ADDRESS
Gary B. Smith	Chairman of Board	Mar-97	132-80-2560	18401 Peninsula Club Cornelius, NC 28031
Michael J. Gresham	President & CEO	Mar-97	564-78-6379	91 Waterside Circle Redwood City, CA 94065
Amir Zoufonoun	Vice President	Jun-96	568-47-7367	887 N Central Ave Campbell, CA 95008
Graham Barnes	Vice President	Mar-97	353-72-4656	1415 Kilcare Road Sunol, CA 94586
Barry Foster	Vice President	Mar-97	557-54-7900	812 Corriente Pointe Dr Redwood City, CA 94065
John Saefke	Vice President	Nov-97	471-48-8202	53 Woodhill Drive Redwood City, CA 94061
Hanan Cohen	Vice President	Aug-97	622-84-7713	677 Torrington Drive Sunnyvale, CA 94087
Stanley Ciepcielski	CFO & Treasurer	Apr-95	265-37-4126	632 Stanhope Lane Matthews, NC 28105
Eugene C. Pridgen	Secretary	Mar-97	237-72-9020	5935 Carnegie Blvd Charlotte, NC 28209
Billy C. Layton	Assist Secretary	Jun-96	237-72-9467	5935 Carnegie Blvd Charlotte, NC 28209
Jerome N. Pinter	Assist Secretary	Apr-95	392-60-1891	765 San Antonio Rd #63 Palo Alto, CA 94303

DIRECTORS

Gary B. Smith	Chairman	Mar-97	132-80-2560	18401 Peninsula Club Cornelius, NC 28031
Michael J. Gresham	Director	Jun-96	564-78-6379	91 Waterside Circle Redwood City, CA 94065
Stanley Ciepcielski	Director	Apr-95	265-37-4126	632 Stanhope Lane Matthews, NC 28105
Eugene C. Pridgen	Director	Mar-97	237-72-9020	5935 Carnegie Blvd Charlotte, NC 28209