FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 23, 2002 8:00 am Secretary of State DOCUMENT # F98000002704 1. Entity Name 04-23-2002 90376 049 ***150.00 DIECA COMMUNICATIONS, INC. Mailing Address Principal Place of Business 3420 Central Expressway 3420 Central Expressway Santa Clara, CA 95051 Santa Clara, CA 95051 3. Mailing Address 2. Principal Place of Business 3420 CENTRA (EX DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number Santa Clara City & State Clara 77-0470016 Not Applicable Country Sacrta \$8.75 Additional Zip 5. Certificate of Status Desired Santa Clapa Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent =NRAI SERVICES; INC:=== Street Address (P.O. Box Number is Not Acceptable) **526 PARK AVE** TALLAHASSEE FL 32301 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. Delete TITLE Holfman, Charles 3420 CENTRAL Expressivay NAME MARSHALL, FRANK J NAME STREET ADDRESS STREET ADDRESS **4250 BURTON DRIVE** CITY-ST-ZIP Santa ClapA, CA 95051 SANTA CLARA CA 95054 CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME KHANNA, DHRUV 3420 Centra (Expressivay Sauta Chira, CA 85051 STREET ADDRESS STREET ADDRESS **4250 BURTON DRIVE** CITY-ST-ZIP CITY-ST-ZIP SANTA CLARA CA 95054 Change Change X Addition TITLE 💢 Delete דמ Richman Mark 3420 Centra (Expressiva) Sapta Clara, CA 9505 NAME NAME PERRY, MARK STREET ADDRESS STREET ADDRESS 4250 BURTON DRIVE CITY-ST-ZIP CITY-ST-ZIP SANTA CLARA CA 95054 Change ☐ Addition TITLE ☐ Delete AS NAME CARLEN, DOUG 3420 Central Expressival STREET ADDRESS STREET ADDRESS **4250 BURTON DRIVE** CITY-ST-ZIP CITY-ST-ZIE SANTA CLARA CA 95054 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

EQUIREDMark Richman, Treasurex

(9/01)