FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2002 8:00 am Secretary of State F98000004943 DOCUMENT # 1. Entity Name 01-23-2002 90032 004 ***150 00 WYLE LABORATORIES INC. Mailing Address Principal Place of Business 128 MARYLAND STREET 128 MARYLAND STREET EL SEGUNDO CA 90245 EL SEGUNDO CA 90245 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 95-4501907 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Talifforger Love Filips CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) ... ☐ Addition TITLE CPD · ☐ Delete TITLE Change YIAKAS, CONSTANTINOS D NAME NAME STREET ADDRESS 128 MARYLAND STREET STREET ADDRESS CITY-ST-ZIP EL SEGUNDO CA 90245 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME VAN KIRK, DOUGLAS NAME STREET ADDRESS STREET ADDRESS 128 MARYLAND STREET CITY-ST-ZIP CITY-ST-ZIP **EL SEGUNDO CA 90245** ☐ Addition ☐ Delete TITLE TITLE NAME NAME SMITH, DREXEL 128 MARYLAND STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EL SEGUNDO CA 90245 ☐ Change ☐ Addition TITLE TITLE ☐ Delete KERŴIN, JOSEPH P MD NAME NAME STREET ADDRESS 128 MARYLAND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP EL SEGUNDO CA 90245 Change ☐ Addition TITLE TITLE ☐ Delete NAME HOUSER, ROBERT MAME STREET ADDRESS STREET ADDRESS 128 MARYLAND STREET CITY-ST-ZIP CITY-ST-7IP EL SEGUNDO CA 90245 VSD ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME SMITH, L. C. NAME STREET ADDRESS 128 MARYLAND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EL SEGUNDO CA 90245 13. 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 11 or Block 12 if

SIGNATURE:

[[[Corporate Controller Douglas Van Kir