## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SAN JOSE, CA 95113

SIGNATURE:

FILED
May 06, 2005 08:00 AM
Secretary of State

ANNUAL KEPUKI						, Secretary of State				
1. Entity Nan	MENT # F990000053	06						V		
,	ce of Business NN FERNANDO STREET CA 95113	Mailing Address 50 WEST SAN FERNANDO STRI SAN JOSE, CA 95113	50 WEST SAN FERNANDO STREET		[ <b>!E#</b> !/ <b>#</b> # <b>!</b> !/		HAN <b>aa</b> nn <b>aa</b>		ii ii i <b>i ii</b>	
DO NOT WRITE IN THIS SPA				-	04252005 4. FEI Numbe 77-052	No Chg-P	CR2E0	34 (10/03) Appli	ied For Applicable	
	6. Name and Address of Current Re	istered Agent								
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			DO NOT WRITE IN THIS SPACE							
	e named entity submits this statement for this statement for the statement of registered agent and statement for the sta		ed office or reg		d agent, or bot	h, in the State of Flo	orida. I am fi	amiliar with, an	d accept	
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campai Trust Fund Contr			· –					.00		
10.	OFFICERS AND DI	RECTORS	1							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCCD CARTWRIGHT, PETER 50 WEST SAN FERNANDO STREE SAN JOSE, CA 95113	TT			= ·	y en e				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC CURTIS, AÑN B 50 WEST SAN FERNANDO STREE SAN JOSE, CA 95113	ग <u></u>		'						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP MASON, THOMAS M 50 WEST SAN FERNANDO STREE SAN JOSE, CA 95113	π			DO	NOT W	/RITE	-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP KELLY, ROBERT D 50 WEST SAN FERNANDO STREE SAN JOSE, CA 95113	т		. <u>-</u>	IN 7	THIS SF	ACE	•	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO CLARK, CHARLES B JR. 50 WEST SAN FERNANDO STREE SAN JOSE, CA 95113	T		e egron						
TITLE NAME STREET ADDRESS	AS BODENSTEINER, LISA M 50 WEST SAN FERNANDO STREE	τ							i	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Yanira Wong

ED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

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4/28/05

Daytime Phone #