2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 05, 2003 8:00 am Secretary of State

DOCUMENT # MS 1. Entity Name DAGREN, INC.	02351				05-05-2003 92194	018 ***158.	/5
SAN JOSE, CA 95113 SAN JOSE, CA 95113		RIDDER TAX San Fernando ST-Sti			90126011		
2. Principal Place of Business Knight Ridder Suite, Apt. #, etc. 50 W. San Feri	Tay D	ept.	200 X CHECK HERE IF MAK	ING CHANGES			
City & State San Jose, C	City 8	W. Santer Jose, Ci			El Number 65-0106805	<u> </u>	oplied For
Zip 95113 Count	U.S. 95	113	untry U.S.		Certificate of Status Desired	\$8.75 Add Fee Require	ditional
Name and Address of Current Registered Agent C T CORPORATION				7. <u>N</u>	ame and Address of New Register	ed Agent	
1200 S. PINE ISLAND RD FORT LAUDERDALE, FL 33324			Street Address (P.O. Box Number is Not Acceptable)				
			City			Zip Cod	e
The above named entity submit- the obligations of registered age		se of changing its regis	atered office or r	registered age	ent, or both, in the State of Florida. I	am familiar with,	and accept
SIGNATURE Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agents ignature required when reinstating) DATE							
FILE NOWILL FEE After May 1: 2003 Fee I Make Check Payable to Florid	vili be \$550.00				Election Campaign Financing Trust Fund Contribution.		O May Be
10.	OFFICERS AND DIRECTOR		11.	ADO	DITIONS/CHANGES TO OFFICERS		
NAME CONNORS, MAR' STREET ADDRESS CITY-ST-2P SAN JOSE, CA 9	ANDO ST - #1500		NAME STREET ADDRESS COTY-ST-ZIP			[] Change	Addition
TITLE S NAME LAFFOON, POLK STREET ADDRESS CITY-ST-2P SAN JOSE, CA 9	ANDO ST - #1500		TITLE NAME STHEET ADDRESS CITY-ST-ZIP	-		☐ Change	Addition
1 ITLE AVP NAME HAUSWIRTH, LYI STREET ADDRESS CITY-ST-2P SAN JOSE, CA 9	ANDO ST - #1600		NAME STREET ADDRESS CITY-ST-ZIP	AV		Change	Addition
ITILE D NAME ROSSI, STEVEN STREET ADDRESS 60 W SAN FERNA CITY-ST-ZIP SAN JOSE, CA 9			TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition
TITLE D NAME YAMATE, GORDO STREET ADDRESS CITY-ST-ZP SAN JOSE, CA 9	ANDO ST		NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE D NAME RIDDER, ANTHOI STREET ADDRESS CITY-ST-2P SAN JOSE, CA 9:	NDO ST 5113		NAME STREET ADDRESS CITY-S\$-ZIP			☐ Change	☐ Addition
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 proposered 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.							
SIGNATURE: Lynda Hauswirth 128 03 408 938 7700							