2001 UNIFORM BUSINESS REPORT (UBR)

Mar 12, 2001 8:00 am Secretary of State **DOCUMENT # P17908** 1. Entity Name AEROFLEX UTMC MICROELECTRONIC SYSTEMS INC. 03-12-2001 90494 002 ***150.00 Mailing Address Principal Place of Business 4350 CENTENNIAL BLVD. 4350 CENTENNIAL BLVD. COLORADO SPRINGS CO 80907 COLORADO SPRINGS CO 80907 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 84-0822182 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees \Box (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change ☐ Delete TITLE TITLE GORIN, MICHAEL NAME NAME STREET ADDRESS 35 S SERVICE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLAINVIEW NJ 11803 <u>Plainview, NY 11803</u> √ Change ☐ Addition ☐ Delete TITLE TITLE BOROW, LEONARD NAME NAME STREET ADDRESS 35 S. SERVICE ROAD STREET ADDRESS Plainview, NY 11803 CITY-ST-7IP PLAINVIEW NJ 11803 CITY-ST-ZIP PD-President____ CX Change _ TITLE Delete TITLE Charles Gregory IDE, CHARLES NAME NAME STREET ADDRESS 4350 CENTENNIAL BLVD 4350 Centennial Blvd STREET ADDRES CITY-ST-ZIP COLORADO SPRINGS CO 80907 CITY-ST-ZIP Colorado Springs, CO 80907 ☐ Addition Tst Change TITLE □ Delete TITLE **BLAU, HARVEY** NAME NAME 35 S. SERVICE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLAINVIEW NJ 11803 <u>Plainview. NY 11803</u> ☐ Change ☐ Addition TITLE ΑT . Delete TITLE ROSACKER, JANET L NAME" NAME STREET ADDRESS STREET ADDRESS 4350 CENTENNIAL BLVD CITY-ST-ZIP CITY-ST-ZIP COLORADO SPRINGS CO 80907 "Assistant Secretary **K**Change AST TITLE ☐ Addition TITLE ☐ Delete BADLATO, CHARLES NAME Charles Badlato NAME 35 S. SERVICE ROAD STREET ADDRESS STREET ADDRESS 35 S. Service Road CITY-ST-ZIP CITY-ST-7IP PLAINVIEW NJ 11803 <u>Plainview, NY 11803</u> 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 changed, or on an attachment with an address, with all other like empowered.

FILED

719-594-8165

Daytime Phone #

President

Charles Gregory

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: