

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT


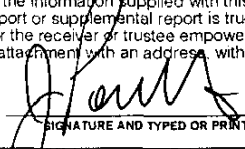
**FILED**  
**Jul 27, 2006 8:00 am**  
**Secretary of State**

07-27-2006 90015 046 \*\*\*150.00

**40100805**



07202006 Chg-P CR2E034 (11/05)

<b>DOCUMENT # P20975</b>					
1. Entity Name SYMBOL TECHNOLOGIES, INC.					
Principal Place of Business 1 SYMBOL PLAZA MAIL STOP A-35 HOLTSVILLE, NY 11742 US			Mailing Address 1 SYMBOL PLAZA MAIL STOP A-35 HOLTSVILLE, NY 11742 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 11-2308681			Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY ST ZIP	SVP ABBOTT, TODD 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SVP BRUNO, JOHN 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SVP Boris Melitsky 1 symbol Plaza Holtzville, NY 11742	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	CAO LANGROCK, JAMES 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SVP HEWLIN, TODD 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	CFO Timothy T. Yates 1 Symbol Plaza Holtzville, NY 11742	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	CEOP IANNUZZI, SALVATORE 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SVPS LEIB, PETER 1 SYMBOL PLAZA HOLTSVILLE, NY 11742	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Acting S Michael C. Miller 1 Symbol Plaza Holtzville, NY 11742	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
SIGNATURE: 		James Porretto		7/20/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	
				631-738-2400	

ATTACHMENT  
40100805

Symbol Technologies, Inc.  
2006 Florida For Profit Corporation Annual Report  
Document # P20975  
Officers & Directors - Continued

**Names and Addresses of Principal Officers:**

<b>Title</b>	<b>Name</b>	<b>Business Address</b>	<b>City, State, Zip</b>
VP/T	James Porretto	One Symbol Plaza	Holtsville, NY 11742

**Names and Addresses of Directors:**

<b>Name</b>	<b>Business Address</b>	<b>City, State, Zip</b>
Robert J. Chrenc	18 Harbour Point Dr.	Northport, NY 11768
Salvatore Iannuzzi	One Symbol Plaza	Holtsville, NY 11742
Michael J. Lawrie	8 Country Club Road	Ridgefield, CT 06877
George Sameluk	61 Shadow Lane	Ridgefield, CT 06877
Timothy Yates	One Symbol Plaza	Holtsville, NY 11742
Melvin A. Yellin	1136 Fifth Ave., Suite 11A	New York, NY 10128