

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P21511 (1)  
1. Corporation Name  
ALPHA MICROSYSTEMS, INC.



Principal Place of Business 2722 S FAIRVIEW ST SANTA ANA CA 92704 US	Mailing Address 2722 S FAIRVIEW ST SANTA ANA CA 92704 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
10/27/1988

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	4. FEI Number 95-3108178 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VS <input type="checkbox"/> DELETE	1.1 TITLE	Director/Secretary/VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLADE, JOHN F.	1.2 NAME	
STREET ADDRESS	5934 W. VIEW DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE CA	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TULLIO, DOUGLAS J	2.2 NAME	
STREET ADDRESS	901 SUMMIT DR	2.3 STREET ADDRESS	1380 Temple Hills Drive
CITY-ST-ZIP	LAGUNA BCH CA	2.4 CITY-ST-ZIP	Laguna Beach, CA 92651
TITLE	CD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REYNOLDS, CLARKE E.	3.2 NAME	
STREET ADDRESS	13013 CAMINITO BRACHO	3.3 STREET ADDRESS	
CITY-ST-ZIP	R. BERNARDO CA	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANKIN, ROCKELL H.	4.2 NAME	
STREET ADDRESS	12671 PROMONTORY ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	4.4 CITY-ST-ZIP	
TITLE	VCFO <input checked="" type="checkbox"/> DELETE	5.1 TITLE	VP/CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SORENSEN, JAMES A	5.2 NAME	Jeffrey J. Dunnigan
STREET ADDRESS	4873 TOPEKA DRIVE	5.3 STREET ADDRESS	209 Tarocco
CITY-ST-ZIP	TARZANA CA	5.4 CITY-ST-ZIP	Irvine, CA 92720
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HATHAWAY, HARRY L.	6.2 NAME	Richard E. Mahmarian
STREET ADDRESS	1351 BEDFORD ROAD	6.3 STREET ADDRESS	2400 Via Carrillo
CITY-ST-ZIP	SAN MARINO CA	6.4 CITY-ST-ZIP	Palos Verdes, CA 90274

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  JEFFREY J. DUNNIGAN 1/10/98 (714) 957-8500

CR2E034 (10/97)