


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90040 003 ***150.00

DOCUMENT # P34576 1. Entity Name CUBIC WORLDWIDE TECHNICAL SERVICES, INC.					
Principal Place of Business 9333 BALBOA AVENUE SAN DIEGO, CA 92123-1515			Mailing Address C/O CUBIC CORP TAX DEPT 9333 BALBOA AVENUE M/S 10-31 SAN DIEGO, CA 92123-1515		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 33-0396203	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KOON, RICHARD D. 9333 BALBOA AVENUE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAYES, KEVIN I 9333 BALBOA AVENUE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JIMMIE L BALENTINE 4550 THIRD AVENUE, SE LACEY WA 98503-1053	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARRISON, MARK A. 9333 BALBOA AVENUE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition WILLIAM L HOESE 9333 BALBOA AVENUE SAN DIEGO CA 92123	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYLE, WILLIAM W. 9333 BALBOA AVENUE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition RUTH P VAN SICKLE 4550 THIRD AVENUE, SE LACEY WA 98503-1053	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GCS <input checked="" type="checkbox"/> Delete KOPF, KENNETH A 9333 BALBOA AVE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DINKEL, GERALD R 9333 BALBOA AVE SAN DIEGO, CA 92123		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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: <u>Mark A Harrison</u> MARK A HARRISON 4/25/07 (858) 277-6780 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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