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FILED  
Feb 26 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 # P36094

(1)

1. Corporation Name

SYQUEST TECHNOLOGY, INC.



Principal Place of Business

47071 BAYSIDE PARKWAY  
FREMONT CA 94538

Mailing Address

47071 BAYSIDE PARKWAY  
FREMONT CA 94538

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1991

4. FEI Number

94-2793941

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

TITLE P  
NAME HARPER, EDWIN L  
STREET ADDRESS 47071 BAYSIDE PARKWAY  
CITY-ST-ZIP FREMONT CA

TITLE V  
NAME MONTGOMERY, HENRY C  
STREET ADDRESS 47071 BAYSIDE PKWY  
CITY-ST-ZIP FREMONT CA

TITLE V  
NAME BROWN, CHET  
STREET ADDRESS 47071 BAYSIDE PKWY  
CITY-ST-ZIP FREMONT CA

TITLE VP  
NAME SMITH, JOSEPH B  
STREET ADDRESS 47071 BAYSIDE PARKWAY  
CITY-ST-ZIP FREMONT CA

TITLE VP  
NAME CLEMENS, MICHAEL K  
STREET ADDRESS 47071 BAYSIDE PARKWAY  
CITY-ST-ZIP FREMONT CA

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP  
1.2 NAME COREY, ROBERT  
1.3 STREET ADDRESS 47071 BAYSIDE PARKWAY  
1.4 CITY-ST-ZIP FREMONT, CA

2.1 TITLE COO  
2.2 NAME MACKAY, JOHN  
2.3 STREET ADDRESS 47071 BAYSIDE PARKWAY  
2.4 CITY-ST-ZIP FREMONT, CA

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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

*[Signature]*

2/12/98

CR2E034 (10/97)