

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 01, 2005 08:00 A
Secretary of State

DOCUMENT # P37622

1. Entity Name
UNIVERSAL ELECTRONICS OF DELAWARE, INC.



Principal Place of Business
6101 GATEWAY DR
CYPRESS, CA 90630 US

Mailing Address
6101 GATEWAY DR
CYPRESS, CA 90630 US



02212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-0204817	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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11000006247215
03/01/05-90013-010 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CEO
ARLING, PAUL
6101 GATEWAY DR
CYPRESS, CA 90630

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
FIREHAMMER, RICHARD A. J
8190 CARRINGTON PLACE
BAINBRIDGE TOWNSHIP, OH 44023

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PCEO
LILLENES, ROBERT
6101 GATEWAY DR
CYPRESS, CA 90630

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CFO
PITZ, BERNARD J
6101 GATEWAY DR
CYPRESS, CA 90630

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bernard J. Pitz

Date

2/22/05 (714) 820-1068

Daytime Phone #