

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 OCT - 1 PM 12:41

DOCUMENT #

P94000072229

Amendment

1. Corporation Name

PLANTRONICS, INC.

Principal Place of Business

1717 N. Bayshore Drive
Apt. 1938
Miami, Florida 33132

Mailing Address

1717 N. Bayshore Drive
Apt. 1938
Miami, Florida 33132

2. Principal Place of Business

21 1717 N. Bayshore Drive

Suite, Apt. #, etc.

22 Apt. 1938

City & State

Miami, FL

Zip

33132

Country

25 USA

2a. Mailing Address

26 1717 N. Bayshore Drive

Suite, Apt. #, etc.

27 Apt. 1938

City & State

28 Miami, FL

Zip

29 33132

Country

30 USA

3. Date Incorporated or Qualified
09/27/94

3a. Date of Last Report
10/30/95

4. FEI Number

65-0526045

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 has liability for intangible tax under s. 199.032.
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

George R. Richards
701 Brickell Avenue
Suite 1200
Miami, Florida 33131

10. Name and Address of New Registered Agent

81 Name

Neal S. Litman, P.A.

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

2000 South Dixie Highway

83

Suite 200

84 City

Miami

FL

85 Zip Code

33133

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

8/7/96

12. OFFICERS AND DIRECTORS

TITLE D
NAME Binn, Jason
STREET ADDRESS 1717 N. Bayshore Drive, Apt. 1938
CITY-ST-ZIP Miami, Florida 33132

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

100001968281
-10/08/96--01154--001
*****61.25 *****61.25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/96 305.532.2544

CR2E034 (12/95)