State of California

Bill Jones Secretary of State

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STATEMENT BY DOMESTIC STOCK CORPORATION THIS STATEMENT MUST BE FILED WITH CALIFORNIA SECRETARY OF STATE (SEC. 1502, CORPORATIONS CODE)

WHEN COMPLETING FORM, PLEASE USE BLACK TYPEWRITER RIBBON OR BLACK INK

2026555 1.

DUE DATE; MAY 9, 1998 ADEX ELECTRONICS. INC

3. STREET ADDRESS OF FRINCIPAN BUSINESS OFFICE IN CALIFORNIA (IF ANY) (SAME) 4. MAILING ADDRESS ROOM NO. 4A. CITY AND STATE NAMES OF THE FOLLOWING OFFICERS ARE: Must have these three officers (Sec. 312; Corporations Code). An officer may hold more than one office. 5. CHIEF EXECUTIVE OFFICER, STREET ADDRESS (SEE REVERSE SIDE) 5. STREET ADDRESS (SEE REVERSE SIDE) FINANCY, HUANG 6. SECRETARY 6A. STREET ADDRESS (SEE REVERSE SIDE) 6B. CITY AND STATE 11	
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6. SECRETARY // // 7. CHIEF FINANCIAL OFFICER // // // 7A. STREET ADDRESS (SEE REVERSE SIDE) // // 7B. CITY AND STATE // // // // // // // // //	5C. ZIP CODE 92618
11. CHIEF FINANCIAL OFFICER 14. STREET ADDRESS (SEE MILEOS SIDE)	6C. ZIP CODE
DIRECTORS (NOLVIONES DIRECTORS WING ARE ALSO DEPICEDS (Augab and becomes, list if necessary)	7C. ZIP CODE
DIRECTORS, INCLUDING DIRECTORS WHO ARE ALSO OFFICERS (Affice suppliementaly list in feccessary)	
Must have one or more directors (Chap. 3, Sec. 301a, Corporations Code) Statements not listing directors will be rejected.	BC. ZIP CODE
8. NAME KUAN C. HUANG 2. MeLALEN, SUITE G LAVINE, CA	92618
9. NAME 9A. STREET ADDRESS (SEE REVERSE SIDE) 9B. CITY AND STATE	9C. ZIP CODE
10. NAME 10A. STREET ADDRESS (SEE REVERSE SIDE) 10B. CITY AND STATE	OC. ZIP CODE
11. THE NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:	
DESIGNATED AGENT FOR SERVICE OF PROCESS (Only one agent may be named and must reside in Californi	a.)
12. NAME KUAN C, HUANG	
13. CALIFORNIA STREET ADDRESS IF AGENT IS AN INDIVIDUAL. (DO NOT USE P.O. BOX) DO NOT INCLUDE ADDRESS IF AGENT IS A CORPORATION. 2. MCLAREN, SUITE G, TRVINE, CA 92618	
DESCRIBE TYPE OF BUSINESS OF THE CORPORATION NAMED IN ITEM 1.	
LIECTRONICS MFG & SALES	
15. I DECLARE THAT I HAVE EXAMINED THIS STATEMENT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT AND COMPLET	E.
TYPE OR PRINT NAME OF SIGNING OFFICER OR AGENT SIGNATURE TITLE	DATE