

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90010 039 \*\*\*150.00

**DOCUMENT # 845389**

1. Entity Name

**INNOVATIVE INTERFACES INCORPORATED**

Principal Place of Business

Mailing Address

5850 SHELLMOUND ST  
 EMERYVILLE CA 94608  
 US

5850 SHELLMOUND ST.  
 EMERYVILLE CA 94608-1901  
 US

2. Principal Place of Business

5850 Shellmound Way

3. Mailing Address

5850 Shellmound Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Emeryville, CA

City & State

Emeryville, CA

4. FEI Number

94-2553274

Applied For

Not Applicable

Zip  
 94608

Country  
 USA

Zip  
 94608

Country  
 USA

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HURLEY, JAMIE KANNETTE**  
**INNOVATIVE INTERFACES INC.**  
**1019 S.E. 3RD ST.**  
**OCALA FL 32671**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  Delete  
 NAME KLINE, GERALD M.  
 STREET ADDRESS 901 MENDOCINO  
 CITY-ST-ZIP BERKELEY CA

TITLE PD  Change  Addition  
 NAME KLINE, GERALD M.  
 STREET ADDRESS 5850 Shellmound Way  
 CITY-ST-ZIP Emeryville, CA 94608

TITLE VST  Delete  
 NAME SILBERSTEIN, STEPHEN M.  
 STREET ADDRESS 29 EUCALYPTUS  
 CITY-ST-ZIP BERKELEY CA 97920

TITLE VST  Change  Addition  
 NAME SILBERSTEIN, STEPHEN M.  
 STREET ADDRESS 5850 Shellmound Way  
 CITY-ST-ZIP Emeryville, CA 94608

TITLE Vice President & CFO  Delete  
 NAME HOFBAUER, JAMES A.  
 STREET ADDRESS 5850 Shellmound Way  
 CITY-ST-ZIP Emeryville, CA 94608

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*James A. Hofbauer*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Hofbauer, VP/CFO 03/03/00

Date (510) 655-6200

CR2E034 (9/99)