

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 16 1997 8:00am
Secretary of State

DOCUMENT # 833304 (9)

1. Corporation Name
SELLS-FLOTO, INC.



Principal Place of Business
**8807 WESTWOOD CENTER DR.
VIENNA VA 22182**

Mailing Address
**8807 WESTWOOD CENTER DR.
VIENNA VA 22182-7506**

3. Date Incorporated or Qualified 11/04/1974	3a. Date of Last Report 05/01/1996
4. FEI Number 52-0996636	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent	
UNITED STATES CORPORATION COMPANY 1201 HAYES STEET SUITE 105 TALLAHASSEE FL 32301	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD FELD, KENNETH	1.1 TITLE	C/CEO/D
NAME		1.2 NAME	
STREET ADDRESS	9809 HALTER COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	POTOMAC MD	1.4 CITY-ST-ZIP	
TITLE	VTD SMITH, CHARLES F.	2.1 TITLE	V/T/CFO
NAME		2.2 NAME	Michael Ruch
STREET ADDRESS	8009 GREENWICH WOODS DR	2.3 STREET ADDRESS	8607 Westwood Center Drive
CITY-ST-ZIP	MCLEAN VA	2.4 CITY-ST-ZIP	Vienna, Virginia 22182
TITLE	VSD SOWALSKY, JEROME S.	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS	8813 CHATEAU DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	POTOMAC MD	3.4 CITY-ST-ZIP	
TITLE	VD BLOOM, ALLEN J.	4.1 TITLE	P/COO/D
NAME		4.2 NAME	Stuart Snyder
STREET ADDRESS	9901 MERIDAN ROAD	4.3 STREET ADDRESS	8607 Westwood Center Drive
CITY-ST-ZIP	POTOMAC MD	4.4 CITY-ST-ZIP	Vienna, Virginia 22182
TITLE	V SYKES, ALBERT L., JR.	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS	11409 WOLFS LANDING	5.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFAX STATION VA 22039	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 _____ Albert L. Sykes, Jr. 4/29/97 702 440 1800

CR2E034 (9/96)