


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91016 028 ***150.00

DOCUMENT # F03000001978

1. Entity Name
INGENIUM CORPORATION



Principal Place of Business Mailing Address

9200 BASIL COURT, SUITE ~~400~~ 500 9200 BASIL COURT, SUITE ~~400~~ 500
UPPER MARLBORO, MD ~~20772~~ 20774 UPPER MARLBORO, MD ~~20772~~ 20774

94081423



04162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-1738885	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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO LYNCH, ANDRE 9200 BASIL COURT, SUITE 400 500 UPPER MARLBORO, MD 20772 20774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCOO PETTY, MELVIN 9200 BASIL COURT, SUITE 400 500 UPPER MARLBORO, MD 20772 20774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGG, ARTHUR J LTG RET- 7736 ROCKLEDGE COURT SPRINGFIELD, VA 22152
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHORT, ALONGO E LTG RET 4601 NORTH FAIRFAX DRIVE, SUITE 1200 ARLINGTON, VA 22203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHANKAR, VENKATESH PH.D. UNIVERSITY OF MARYLAND COLLEGE PARK, MD 20742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCISAAC, ROBERT FLMI LL 7 HANOVER SQUARE, 4TH FLOOR NEW YORK, NY 10004

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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 empowerments.

SIGNATURE: Andre L. Lynch **Andre L. Lynch** 4/24/04 301 883-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #