

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

FILED
May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F96000002045 (0)

1. Corporation Name
DIGITAL SERVICES CORPORATION



Principal Place of Business: **211 NORTH UNION ST SUITE 300 ALEXANDRIA, VA 22314**
 Mailing Address: **211 NORTH UNION ST SUITE 300 ALEXANDRIA VA 22314**

2. Principal Place of Business: **211 NORTH UNION ST SUITE 300 ALEXANDRIA, VA 22314**
 2a. Mailing Address: **211 North Union Street SUITE 300 Alexandria, VA 22314**

3. Date Incorporated or Qualified: **04/24/1996** 3a. Date of Last Report: **N/A**
 4. FEI Number: **54-1571893** 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: **C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324**

10. Name and Address of New Registered Agent: **FL 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's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTCD	11 TITLE	PTCD
NAME	SINGH, RAJENDRA	12 NAME	SINGH, RAJENDRA
STREET ADDRESS	2300 CLARENDON BLVD, STE 800	13 STREET ADDRESS	211 NORTH UNION ST, SUITE 300
CITY-ST-ZIP	ARLINGTON VA	14 CITY-ST-ZIP	ALEXANDRIA, VA 22314
TITLE	VSD	21 TITLE	VSD
NAME	SINGH, NEERA	22 NAME	SINGH, NEERA
STREET ADDRESS	2300 CLARENDON BLVD, STE 800	23 STREET ADDRESS	211 NORTH UNION ST SUITE 300
CITY-ST-ZIP	ARLINGTON VA	24 CITY-ST-ZIP	ALEXANDRIA VA 22314
TITLE	AS	31 TITLE	AS
NAME	PERKINS, HAL B	32 NAME	PERKINS HAL B
STREET ADDRESS	2300 CLARENDON BLVD, STE 800	33 STREET ADDRESS	211 NORTH UNION ST 300
CITY-ST-ZIP	ARLINGTON VA	34 CITY-ST-ZIP	ALEXANDRIA VA
TITLE		41 TITLE	AT
NAME		42 NAME	Rahul Prakash
STREET ADDRESS		43 STREET ADDRESS	211 North Union Street, Suite 300
CITY-ST-ZIP		44 CITY-ST-ZIP	Alexandria, VA 22314
TITLE		51 TITLE	AS
NAME		52 NAME	Richard Southard
STREET ADDRESS		53 STREET ADDRESS	211 North Union Street, Suite 300
CITY-ST-ZIP		54 CITY-ST-ZIP	Alexandria, VA 22314
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 in an attachment with an address.

SIGNATURE: *Rahul Prakash* **Rahul Prakash** 11/2/97 (703) 700-3000

CR2E034 (9/96)