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Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

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

DOCUMENT # **F96000003700 (9)**

1. Corporation Name
ACE*COMM CORPORATION

Principal Place of Business	Mailing Address
704 QUINCE ORCHARD RD SUITE 100 GAITHERSBURG MD 20878 US	704 QUINCE ORCHARD RD SUITE 100 GAITHERSBURG MD 20878 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/22/1996

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

4. FEI Number: 52-1283030 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	☐ DELETE	1.1 TITLE	PTDC	☒ Change ☐ Addition
NAME	JIMENEZ, GEORGE J		1.2 NAME		
STREET ADDRESS	209 PERRY PKWY.		1.3 STREET ADDRESS		
CITY-ST-ZIP	GAITHERSBURG MD 20877		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE	For DORR, JIMENEZ, RIVERS -	☒ Change ☐ Addition
NAME	DORR, S J		2.2 NAME		
STREET ADDRESS	209 PERRY PKWY.		2.3 STREET ADDRESS	704 Quince Orchard Road	
CITY-ST-ZIP	GAITHERSBURG MD 20877		2.4 CITY-ST-ZIP	Gaithersburg, MD 20878	
TITLE	S	☐ DELETE	3.1 TITLE	V	☐ Change ☒ Addition
NAME	RIVERS, LORETTA L		3.2 NAME	Thomas V. Russotto	
STREET ADDRESS	209 PERRY PKWY.		3.3 STREET ADDRESS	704 Quince Orchard Road	
CITY-ST-ZIP	GAITHERSBURG MD 20877		3.4 CITY-ST-ZIP	Gaithersburg, MD 20878	
TITLE	D	☐ DELETE	4.1 TITLE	V	☐ Change ☒ Addition
NAME	CASNER, PAUL G JR		4.2 NAME	Joseph F. Greeves	
STREET ADDRESS	200 PROFESSIONAL DR.		4.3 STREET ADDRESS	704 Quince Orchard Road	
CITY-ST-ZIP	GAITHERSBURG MD 20879		4.4 CITY-ST-ZIP	Gaithersburg, MD 20878	
TITLE	D	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	GOLDING, GARY P		5.2 NAME		
STREET ADDRESS	1950 OLD GALLOWS RD., #440		5.3 STREET ADDRESS	1420 Springhill Rd, Suite 420	
CITY-ST-ZIP	VIENNA VA 22182-3933		5.4 CITY-ST-ZIP	McLean, VA 22102	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	WETZEL, GILBERT A		6.2 NAME		
STREET ADDRESS	2 PENN CENTER PLAZA, #610		6.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19102-1706		6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. 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 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: [signature] Secretary 4/20/98 301-721-3000