2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED** Apr 28, 2003 8:00 am Secretary of State

| DOCUMENT # F97000003588   |  |  |  |              |                             |             |   | 04-28-2003 91366 022 ***150.00          |                  |                               |                              |                 |  |
|---|--|--|--|--------------|-----------------------------|-------------|---|---|------------------|-------------------------------|------------------------------|-----------------|--|
| 1. Entity Nan<br>VMS MAI  |  | CE SYSTEMS, INC.   | Control of the second of   | 1            |                             |             | P. (\$  |   |                  |                               |                              |                 |  |
| '   | ce of Business<br>PARHAM ROAD<br>VA 23228  |  | Mailing Address 1510 EAST PARHAM ROAD RICHMOND, VA 23228   |              |                             |             |   |   |                  |                               |                              |                 |  |
| 2. Principal f<br>203 E<br>Suite, Apt   | Place of Busin   | ess<br>ry Street   | 3. Mailing Address 203 East Cary Street Suite Apt. #. etc.   |              |                             | <b>-</b>    |   |   |                  |                               |                              |                 |  |
| 203   |  |  | 203  |              |                             |             | CHECK HERE IF MAKING CHANGES                      |   |                  |                               |                              |                 |  |
| Eichmend  |  | VA ·   | Eichmond,  | VA           |                             | 4. FE) Nui  |   | 54-1769861                              |                  | Applied For<br>Not Applicable |                              |                 |  |
| ·210<br>23219   |  | Country  | <sup>z</sup> 23219   | Coun         | ITY<br>ISA                  | 5           | . Certificate o                                   | f Status Desired                        |                  | 8.75 Add<br>ee Require        |                              |                 |  |
| , -   | 6. Name  | and Address of Current   | Registered Agent   |              | Nama                        | 7.          | . Name and A                                      | Iddress of New R                        | egistered A      | gent                          |                              | 7               |  |
|   |  | ICE COMPANY  |  |              | Name                        |             |   |   |                  |                               |                              |                 |  |
| 1201 HAYS<br>TALLAHAS   | STREET<br>SEE, FL 32   | 2301-2525  | Street Add   |              |                             | ddress (P.O | ess (P.O. Box Number is Not Acceptable)           |   |                  |                               |                              |                 |  |
|   |  |  |  |              |                             |             |   |   |                  |                               |                              |                 |  |
|   |  |  |  |              | City                        |             | <u> </u>  |   | FL               | Zip Cod                       |                              |                 |  |
| 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  Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstailing)  OATE   |  |  |  |              |                             |             |   |   |                  |                               |                              |                 |  |
|   | elasti karasta a   |  |  |              |                             |             |   | <del></del>                             |                  |                               |                              | -               |  |
| Afte  | r May 1, 200   | I), FEE IS \$150,00<br>33 Fee will be \$550,00<br>Florida Department o | f State  |              |                             |             |   | tion Campaign Fin<br>t Fund Contributio |                  |                               | <b>0</b> May Be<br>d to Fees |                 |  |
| 10.   |  | OFFICERS AND   | RECTORS 11.  |              |                             |             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |                  |                               |                              |                 |  |
| TITLE   | PCEO   |  | ☐ Delete   | 1010         |                             | Direc       |   |   |                  | Change Addition               |                              | (02)            |  |
| NAME<br>STREET ADDRESS  |  | NICHOLAS J<br>FPARHAM ROAD   |  |              | NAME NAME STREET ADDRESS ZO |             | holds J. Musucci<br>East Cary St., Stc 203        |   |                  |                               |                              | 65)             |  |
| CITY;-ST-2IP  | RICHMON  |  |  | · []         | -51 -21P                    | Rich        | nond, V   | A 23219                                 |                  |                               |                              | CRZE034 (10/02) |  |
| TITÉE   | EV   | Delete   |  | M            | TITLE Presi                 |             | dent & CEO  |   |                  | Mange ☐ Addition ☐            |                              |                 |  |
| STREET ADDRESS  | RICHARD, HERLICH<br>1510 EAST PARHAM ROAD  |  | R I  |              | ET ADDRESS                  | 202 E       | ast Cary St., Ste 203                             |   | 203              |                               |                              |                 |  |
| CITY-ST-ZIP   | RICHMON  | D, VA 23228  |  | СПУ          |                             | Rich        | mond, VA 23219                                    |   | 219              |                               |                              |                 |  |
| TITLE<br>NAME   | SACKS, BERNARD   |  | Delete   | Ħ            | TITLE<br>NAME               |             | •   |   |                  | 🔀 Change                      | Addition                     | 1               |  |
| STREET ADDRESS  | 1  | DEAST PARHAM ROAD  |  | la .         | STREET ADDRESS 203          |             | East Cary St., Stc 203                            |   |                  |                               |                              |                 |  |
| CITY-ST-ZIP   |  | D, VA 23228  |  | CITY         | -ST -21P                    | Richi       | mmdi  | VA 23219                                | <del>1</del>     |                               |                              | -               |  |
| TITLE<br>NAME   | TAS  | ENNETH E   | Delete   | 1010<br>NAM  |                             |             |   | _                                       | ļ                | Change Change                 | Addition                     |                 |  |
| STREET ADDRESS  | '  | PARHAM ROAD  |  | . 14         | ET ADDRESS                  | 203 €       | Fast Co   | ery St.,                                | Ste: 20          | 3                             |                              |                 |  |
| CITY-ST-ZIP   |  | D, VA 23228  | _ <del></del>  | CITY         | -ST - ZIP                   | Rich        | mmd   | VA 23                                   | 219              |                               |                              |                 |  |
| TITLE<br>NAME   | D<br>SCHWART   | ΓZ JR. H G   | <b>⊠</b> Delete  | TITLE        |                             |             |   |   |                  | ☐ Change                      | Addition                     |                 |  |
| STREET ADDRESS  | 1510 EAST PARHAM ROAD  |  |  | STREET ADDRE |                             |             |   |   |                  |                               |                              |                 |  |
| CITY-ST-ZIP   | RICHMONI   | D, VA  |  | CITY.        | -ST -ZIP                    |             | <u> </u>  |   |                  | <b>17</b> a                   |                              | -               |  |
| TITLE<br>NAMÉ   | CD<br>PROSSER  | . JOHN   |  |              | i<br>E                      | John        | Prosser S. Arroyo Pkwy                            |   |                  |                               | Addition                     |                 |  |
| STREET ADDRESS  | ESS 1111 S ARROYO PKWY   |  | Salah Sa | STRE         | ET ADDRESS 1111             |             | . Arroy   | 10 PKWY                                 | حويهما برايان وا | - , ,                         |                              |                 |  |
| CITY-ST-ZIP   |  |  |  | - H          | ST-ZIP                      |             |   | A 91105                                 |                  |                               | ment for all                 |                 |  |
| indicated of the cor  | 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 coporation 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 empowered. |  |  |              |                             |             |   |   |                  |                               |                              |                 |  |