

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90072 041 ***150.00

DOCUMENT # F99000000139

1. Entity Name

LORAL GLOBAL SERVICES, INC.

Principal Place of Business 600 THIRD AVE. NEW YORK NY 10016-2065	Mailing Address 600 THIRD AVE. NEW YORK NY 10016-1901
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2. Principal Place of Business 2440 Research Blvd., Suite 400 Suite, Apt. #, etc. Rockville, MD	3. Mailing Address Suite, Apt. #, etc. City & State
City & State	City & State
Zip 20850	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4037343	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SCHWARTZ, BERNARD L 600 THIRD AVE. NEW YORK NY 10016-2065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete PVC CLARK, GREGORY J 600 THIRD AVE. NEW YORK NY 10016-2065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President, Secretary & Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Avi Katz 600 Third Avenue New York, NY 10016-2065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SD ZAHLER, ERIC J 600 THIRD AVE. NEW YORK NY 10016-2065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & COO, Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete VP DEBLASIO, MICHAEL P 600 THIRD AVE. NEW YORK NY 10016-2065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete T MOREN, NICHOLAS C 600 THIRD AVE. NEW YORK NY 10016-2065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Avi Katz **REQUIRED** VICE PRESIDENT/SECY 4/14/00

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CF 1014 (01/00)