2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003791

1. Entity Name
VASTERA INC.

FILED
01 NOV 15 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
45025 AVIATION DRIVE. SUITE 200 DULLES VA 20166-7554	45025 AVIATION DRIVE. SUITE 200 DULLES VA 20166-7554

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 54-1616513 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) REINSTATEMENT 01 City FL Zip Code

600004593616--1
-11/26/01--01074--002
****750.00 ****750.00

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 Mark Diffenbaugh Mark J. Diffenbaugh Asst. Secretary & V. President 11/14/01
Signature, typed or printed name of registered agent and title if applicable. (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. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 12, 2001 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RISHI, ARJUN 45025 AVIATION DRIVE, SUITE 200 DULLES VA 20166-7554	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/CEO Rishi, Arjun 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS RISHI, PR 45025 AVIATION DRIVE, SUITE 200 DULLES VA 20166-7554	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Nierenberg, Nico 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRETT, BOB 901 MARINER'S ISLAND BLVD. SUITE 475 SAN MATEO CA 94404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Balsamo, Phil 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIMBALL, RICHARD 575 HIGH STREET, SUITE 400 PALO ALTO CA 94301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Henderson, Brian 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEFEBVRE, RICHARD 66 ISLAND ESTATES PKWY PALM COAST FL 32137	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Perrer, Mark 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBINSON, JAMES IV 126 EAST 56TH STREET NEW YORK NY 10022	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Davenport, Tim 45025 Aviation Drive, Suite 200 Dulles, VA 20166-7554	☐ Change ☑ 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.

CT CORPORATION SYSTEM

CORPORATION(S) NAME

Vastera Inc.

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( ) Profit ( ) Nonprofit	( ) Amendment	( ) Merger
( ) Foreign	( ) Dissolution/Withdrawal (X) Reinstatement	( ) Mark
( ) Limited Partnership ( ) LLC	( ) Annual Report ( ) Name Registration ( ) Fictitious Name	( ) Other ( ) Change of RA ( ) UCC
( ) Certified Copy	( ) Photocopies	( ) CUS
( ) Call When Ready (x) Walk In ( ) Mail Out	( ) Call If Problem ( ) Will Wait	( ) After 4:30 (x) Pick Up

RECEIVED
01 NOV 15 PM 1:27
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Name Availability _____
Document Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

11/15/01

Order#: 4919589

Ref#: _____

Amount: $_____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615