

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001458

FILED
May 24, 2005
Secretary of State

Entity Name: COUNTER TECHNOLOGY, INC.

Current Principal Place of Business:

4733 BETHESDA AVE., SUITE 800
BETHESDA, MD 20814

New Principal Place of Business:

Current Mailing Address:

4733 BETHESDA AVE., SUITE 800
BETHESDA, MD 20814

New Mailing Address:

FEI Number: 52-1498419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARZA, MANUEL R
Address: 230 DIAMOND DRIVE
City-St-Zip: WALKERSVILLE, MD 21793

Title: CD () Delete
Name: GARZA, SANTOS F
Address: 6516 DEMOCRACY BLVD.
City-St-Zip: BETHESDA, MD 20817

Title: S () Delete
Name: HIGAREDA, MARTIN
Address: 19 SILVER MOON DRIVE
City-St-Zip: SILVER SPRING, MD 20904

Title: T () Delete
Name: ASHBURY, ALLISON M
Address: 1813 CYRIL COURT
City-St-Zip: FREDERICK, MD 21701

Title: D () Delete
Name: HANKINS, EMMA L
Address: 335 KINGSWAY DRIVE
City-St-Zip: AURORA, IL 60506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARZA, MANUEL R
Address: 116 CAPRICORN ROAD
City-St-Zip: WALKERSVILLE, MD 21793

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANTOS F. GARZA

CD

05/24/2005

Electronic Signature of Signing Officer or Director

Date