FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90118 039 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 513733

1. Entity Name

AVS/CAI, Inc.

DO NOT WRITE IN THIS SPACE

11028862

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
623 Radar Road	623 Radar Road
Suite, Apt. #, etc.: c/o Corp Finance	Suite, Apt. #, etc.: c/o Corp Finance
City & State: Greenboro, N.C.	City & State: Greensboro, N.C.
Zip: 27410 Country:	Zip: 27410 Country:

4. FEI Number: 59-1710967 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: C T Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

City: Plantation **FL** Zip Code: 33324

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	Chairman & CEO	TITLE	
NAME	Rimmer, Roy T.	NAME	
STREET ADDRESS	623 Radar Road	STREET ADDRESS	
CITY - ST - ZIP	Greensboro, N.C. 27410	CITY - ST - ZIP	
TITLE	President & COO	TITLE	
NAME	West, W. Gil	NAME	
STREET ADDRESS	623 Radar Road	STREET ADDRESS	
CITY - ST - ZIP	Greensboro, N.C. 27410	CITY - ST - ZIP	
TITLE	CFO & Executive Vice President	TITLE	
NAME	Campbell, C. Robert	NAME	
STREET ADDRESS	623 Radar Road	STREET ADDRESS	
CITY - ST - ZIP	Greensboro, N.C. 27410	CITY - ST - ZIP	**DO NOT WRITE IN THIS SPACE**
TITLE	Treasurer	TITLE	
NAME	Pirozzi, Francis X.	NAME	
STREET ADDRESS	623 Radar Road	STREET ADDRESS	
CITY - ST - ZIP	Greensboro, N.C. 27410	CITY - ST - ZIP	
TITLE	Secretary	TITLE	
NAME	Schwartz, Philip B.	NAME	
STREET ADDRESS	623 Radar Road	STREET ADDRESS	
CITY - ST - ZIP	Greensboro, N.C. 27410	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

CR2E034B (12/02)

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 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Francis X. Pirozzi 4/25/03 (336) 668-4410
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STF FL32381F.1