2006 FOR PROFIT CORPORATION

ANNUAL REPORT

OCUMENT # 905191



FILED Aug 28, 2006 8:00 am Secretary of State

1. Entity Name NORTHROP GRUMMAN SPACE & MISSION SYSTEMS CORP.						08-28-2006	90003 019 ***1	50.00
1840 CENTU	e of Business RY PARK EAST S, CA 90067 US	Mailing Address P.O. BOX 601047 LOS ANGELES, CA 9000	50 -1 047	, F1			50026532	
2. Principal Place of Business		3. Mailing Address 1840 Century Park East		East				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07252006	Chg-P	CR2E034 (11/0	5)	
City & State		City & State Los Angeles, CA		4. FEI Number 34-057			Applied For Not Applicable	
Zip	Country	90067	Country USA		5. Certificate	of Status Desired	□ \$8.75 Fee Requ	Additional iired
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
				Name				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)				
	•	•	- 	City ""	• • •		FI Zip C	ode
9. The above	named entity submits this statement for	the aureose of changing its	registered	office or register	rad agast or ba	th in the State of Ele	nside. Lam families w	ith and assest
	ions of registered agent.	the purpose of changing its i	egistered	Office of register	red agent, or bo	iii, iii bie State Oi Fk	onda. Tamianiila w 	iiii, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
								
	LE NOWIII FEE IS \$150.00 ue by September 6, 2006	9. Election Campaiç Trust Fund Contri			.00 May Be led to Fees	In accordance v	with s. 607.193(2)(not receive the pri	b), F.S., the or notice.
	ue by September 6, 2006 OFFICERS AND I	Trust Fund Contri		Add	led to Fees ADDITIONS	corporation did	with s. 607.193(2)(not receive the pri	or notice.
10.	ue by September 6, 2006 OFFICERS AND 6 PCEO	Trust Fund Contri	ibution.	□ Add	ADDITIONS: esident	corporation did	not receive the pri	or notice. DRS IN 11
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

WV~ E OF SIGNING OFFICER STATE HER M. Salmas, Secretary 7/28/2006 310-3916