FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 14, 2002 8:00 am Secretary of State

DOCU 1. Entity Nam	MENT # 82725	03-14-2002 90331	019 ***150.00				
Litton Systems, Inc.					420	232	
İ	DO NOT WRITE	IN THIS SP	AC	E	THE THE		
2. Principal Place of Business Park East 3. Mailing Address Same				•			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		. FEI Number Applied For			
Los Angeles, CA. Zip Country		Zip Country		ry	95-2277760 5. Certificate of Status Desired	Not Applicable \$8.75 Additional	
9006	07 USA	1	. · · · · · · · · · · · · · · · · · · ·		7. Name and Address of Current Registered	ee Required Agent	
				Name			
DO NOT WRITE IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable)			
		, , , , , , , , , , , , , , , , , , ,	-	City	FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its re-							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. NOTE: River in the properties of a printed name of registered agent and title if applicable. 1. Analysis January 1 - May After May 1, Amended to the printed name of registered agent and title if applicable. 1. Analysis Analysis Amended to the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the printed name of registered agent and title if applicable. 1. NOTE: River in the prin				\$550.00 \$61,25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11,	OFFICERS AND DI	RECTORS	TITLE				
TITLE NAME STREET ADDRESS CITY+ST-ZIP				T ADDRESS ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Albert F. Myers 1840 Century Park East Los Angeles, CA. 90067			T ADDRESS ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Kathleen M. Salmas 1840 Century Park East Los Angeles, CA. 90067			F ADDRESS ST-ZIP	DO NOT WRIT	ΓΕ	
THILE NAME STREET ADDRESS CITY-ST-ZIP	Director John H. Mullan 1840 Century Park East Los Angeles, CA. 90067			I ADDRESS 57-ZIP	IN THIS SPACE		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	Director Albert F. Myers 1840 Century Park East Los Angeles, CA. 90067			ADDRESS			
TITLE NAME STREET ADDRESS CHY-S1-ZiP 13. I hereby c	Director W. Burks Terry 1840 Century Park East Los Angeles, CA. 90067 certify that the information supplied with this filing does not qualify for the			ADDRESS 1-ZIP Dilon stated in Sect	tion 119.07(3)(i). Florida Statutes, Uturther conti	y 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

__ Kathleen M. Salmas

Date

(310) 201-3495

Daytime Phone #