FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 10, 2001 8:00 am DOCUMENT # F0000002608 Secretary of State 07-10-2001 90126 019 ***550.00 ECOCOM USA LIMITED CORPORATION Mailing Address Principal Place of Business 8605 WESTWOOD CENTER DRIVE, SUITE 304 UVUILIUL 8605 WESTWOOD CENTER DRIVE, SUITE 304 vienna va 22182 VIENNA VA 22182 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 54-1875641 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent > 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, 12. CEOD Change Addition ☐ Detete TITLE TITLE MANUKIAN, EDWARD NAME STREET ADDRESS STREET ADDRESS 6129 BROOK DRIVE CITY-ST-ZIP CITY-ST-ZIP FALLS CHURCH VA 22044 ☐ Delete ☐ Change Addition TITLE ZINSSER, WALTER NAME NAME STREET ADDRESS STREET ADDRESS 71 PARK STREET, LONDON, W1Y 3HB CITY-ST-ZIP CITY-ST-ZIP united Kingdom TITLE ☐ Change ■ Addition TITLE ERMGASSEN, OLAV NAME 18 WOODSTOCK ROAD, LONDON, W4 1UE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP united Kingdom ☐ Change ☐ Addition TITLE ☐ Delete TITLE HAZOUT, JACK NAME NAME STREET ADDRESS 8, RUE LAFOUGE, 94250, GENTILLY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **FRANCE** ☐ Change Addition TITLE ☐ Defete COWARD, CURT NAME STREET ADDRESS 8280 GREENSBORO DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MCLEAN VA 22102 ☐ Change Addition ☐ Delete TITLE FARSEDAKIS, LEWIS NAME NAME STREET ADDRESS STREET ADDRESS 1500 NORTHERN NECK DR., UNIT NUMBER 202 CITY-ST-ZIP CITY-ST-7IP VIENNA VA 22182 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.

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