2005 FOR PROFIT CORPORATION

ANNUAL REPORT

SENSENICH COMPOSITES, INC.

DOCUMENT # F00000004447



Principal Place of Business

2008 WOOD COURT PLANT CITY, FL 33567 Mailing Address

4601 FORBES BLVD SUITE 120 LANHAM, MD 20706

FILED Apr 27, 2005 8:00 am Secretary of State

04-27-2005 90329 041 ***150.00

14000960



DO NOT WRITE IN THIS SPACE

01032005 No Chg-P CR2E034 (10/03)

4. FEI Number 52-2257762

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

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 reinstalling) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing _	\$5.00 May Be Added to Fees		
10.	10. OFFICERS AND DIRECTORS					
TITLE	P					
NAME	ROWELL, DONALD J					
STREET ADDRESS	4304 LONGFELLOW DRIVE					
C?TY-ST-ZIP	PLANT CITY, FL					
TITLE	ST- CONTROLLER					
NAME	WANK, TERRENCE A SULLIVAN, DONNA 16307 NORWALK COURT 4601 FORBES BLVD					
STREET ADDRESS	46307 NORWALK COURT 4601 FORBES BLVD					
CITY-ST-ZIP	BOWIE, MD LAN AM, MD 20106					
TITLE	CEO			DO NOT WOITE		
NAME	HOZIK, JOHN					
STREET ADDRESS	4601 FORBES BLVD., STE 120					
CITY-ST-ZIP	LANHAM, MD			DO NOT WRITE		
FITLE	IN THIS SPACE				THIC CDACE	
NAME	BOSER, STEVEN 3409 CAMPBELL RD W.			IN THIS SPACE		
STREET ADDRESS						
CITY-ST-ZIP	LAKELAND, FL					
TITLE	D					
NAME	BUTCHER, MCBEE					
STREET ADDRESS	s 4601 FORBES BLVD., STE 120					
CITY-ST-ZIP	LANHAM, MD					

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 Block 11 if, changed or on an attachment with an address with all other like empowered. changed, or on an attachment with an address, with all other

SIGNATURE

NAME

CITY-ST-ZIP

BUTCHER, JONATHAN

STREET ADDRESS 4601 FORBES BLVD., STE 120

NG OFFICER OR DIRECTOR

John Hozik, CEO

301-731-0811

Davtime Phone #