2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jul 07, 2003 8:00 am **Secretary of State** F02000006431 DOCUMENT # 07-07-2003 90310 041 ***550.00 1. Entity Name GLOBAL COMPUTER PRODUCTS INC. Principal Place of Business Mailing Address 4451 BROOKFIELD CORPORATE DRIVE. STE. 112 4451 BROOKFIELD CORPORATE DRIVE, STE. 112 **CHANTILLY VA 20151** CHANTILLY VA 20151 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 54-1838208 Not Applicable Country Country Zip Zio \$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 GANGADHAR, MAHANTHI GANGADHAR, MAHANTHI Street Address (P.O. Box Number is Not Acceptable) 1511 NW 125TH AVE., #8307 SUNRISE FL 33323 19105 STONE BROOK ST WESTON 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. M. Gangadher and of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstation) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE CHINTAM, KRISHNA NAME NAME 4451 BROOKFIELD CORPORATE DR., STE. 112 STREET ADDRESS STREET ADDRESS CHANTILLY VA 20151 CITY-ST-ZIP CITY-ST-ZIP VCP TITLE Delete TITLE Change Addition PATHURI, KALYAN NAME NAME 4451 BROOKFIELD CORPORATE DR., STE. 112 STREET ADDRES STREET ADDRESS CHANTILLY VA 20151 CITY-ST-ZIP CDY:ST:7P TITLE ☐ Delete TITLE ☐ Change ☐ Addition VALLERN, SILVIJA NAME NAME 12209 HARBOR TOWN CIR. STREET ADDRESS STREET ADDRESS FAIRFAX VA 22033 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete Change TITLE CHINTAM, LAKSHMI NAME NAME 3218 NAVY DRIVE STREET ADDRESS STREET ADDRESS **HERNDON VA 20171** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 suppliemental 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.