

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 30, 2006 8:00 am**  
**Secretary of State**

03-30-2006 90014 034 \*\*\*150.00

DOCUMENT # F03000006400

1. Entity Name  
WAVELIGHT, INC.



Principal Place of Business  
46040 CENTER OAK PLAZA, STE. 160  
STERLING, VA 20166-6593

Mailing Address  
46040 CENTER OAK PLAZA, STE. 160  
STERLING, VA 20166-6593



2. Principal Place of Business

3. Mailing Address

46040 Center Oak Plaza

46040 Center Oak Plaza

Suite/Apt. #, etc.

Suite/Apt. #, etc.

STE 160

STE 160

City & State

City & State

Sterling, VA

Sterling, VA

Zip

Country

Zip

Country

20166

USA

20166

USA

03222006

Chg-P

CR2E034 (11/05)

4. FEI Number

58-2651863

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

Name

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 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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE C  
NAME DRAX, MANFRED  
STREET ADDRESS AM WOLFSMANTEL 5  
CITY-ST-ZIP 91058 ERLANGEN, GERMANY. ☒ Delete

TITLE P  
NAME TETSUKA, WADE  
STREET ADDRESS 4600 CENTER OAK PLAZA, STE. 150  
CITY-ST-ZIP STERLING, VA 201666593 ☐ Delete

TITLE S  
NAME KRAUS, HANS MICHAEL  
STREET ADDRESS 46000 CENTER OAK PLAZA, STE. 150  
CITY-ST-ZIP STERLING, VA 201666593 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME Gisy, Christian  
STREET ADDRESS AM WOLFSMANTEL 5  
CITY-ST-ZIP 91058 ERLANGEN, GERMANY. ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS 46040 Center Oak Plaza, STE 160  
CITY-ST-ZIP Sterling, VA 20166 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 46040 Center Oak Plaza, STE 160  
CITY-ST-ZIP Sterling, VA 20166 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Wade Tetsuka

3/22/06 571-434-8500