2007 FOR PROFIT CORPORATION

Jan 25, 2007 08:00 AN ANNUAL REPORT **Secretary of State** DOCUMENT # F04000004840 1. Entity Name WERRES SYSTEMS, INC. Principal Place of Business Mailing Address 807 EAST SOUTH STREET 807 EAST SOUTH STREET FREDERICK, MD 21701 FREDERICK, MD 21701 CR2E034 (11/05) 01122007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 52-0994340 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 000000604282 01/29/07-80047-016 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS CP TITLE SENECAL, DANIEL F MANUE STREET ADDRESS 807 EAST SOUTH STREET CITY-ST-ZIP FREDERICK, FL 21701 TITLE W SOUZA, PAUL A NAME STREET ADDRESS 807 EAST SOUTH STREET CITY-ST-ZIP FREDERICK, MD 21701 TITLE NAME KUHN, JANET L STREET ADDRESS 807 EAST SOUTH STREET DO NOT WRITE FREDERICK, MD 21701 CITY-ST-ZIP TITLE IN THIS SPACE NAME KUHN, JANET L 807 EAST SOUTH STREET STREET ADDRESS CITY-ST-ZIP FREDERICK, MD 21701 TITLE MANE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 it changed, or on an attachment with an address, with althory like improvered.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED