

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

4/28/2003-90978-009-\$150.00-\$150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

03 MAY 28 PM 12:54

DOCUMENT # F88610	
1. Entity Name Paravant Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business c/o DRS Technologies, Inc.	3. Mailing Address c/o DRS Technologies, Inc.
Suite, Apt. #, etc. 5 Sylvan Way	Suite, Apt. #, etc. 5 Sylvan Way
City & State Parsippany, NJ	City & State Parsippany, NJ
Zip 07054	Zip 07054
Country USA	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 592209179	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name CT Corporation System	
	Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Rd.	
	City Plantation	FL Zip Code 33324

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	Robin Laktes Assistant Secretary	DATE 5/7/2003

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Mark S. Newman 5 Sylvan Way, Parsippany, NJ 07054	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Richard A. Schneider 5 Sylvan Way, Parsippany, NJ 07054	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Nina Laserson Dunn 5 Sylvan Way, Parsippany, NJ 07054	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.	
SIGNATURE:	Nina Laserson Dunn 4/21/03 973.898.1500

CR2E034B (12/02)