2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9300000197 Aug 28, 2000 8:00 am Secretary of State 1. Entity Name HERMAN-STEWART CONSTRUCTION AND DEVELOPMENT, INC 08-28-2000 90041 009 ***550.00 Principal Place of Business Mailing Address 4550 FORBES BLVD 4550 FORBES BLVD SUITE 200 SUITE 200 LANHAM MD 20706 LANHAM MD 20706 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 25-1631049 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEMS Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City 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. 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 \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE Delete TITLE HERMAN, RAYMOND JAMES NAME NAME 1310 ST. PAULS WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CROWNSVILLE MD ☐ Addition (Change TITLE **X** Delete TITLE Matthew D. Whitney, STEWART, GEORGE WILLIAM IV NAME NAME Drexel STREET ADDRESS 1314 OZKAN ST. STREET ADDRESS 142 CITY-ST-ZIP CITY-ST-ZIP 21144 MCLEAN VA 22102 Change ☐ Addition Delete TITLE TITLE-NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

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

SIGNATURE: Signature Property Signature Signatur

Herman,

Carmona

7/20/00

<u> 301-731-5555</u>