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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000004325 (7)

1. Corporation Name

UNIVERSAL SYSTEMS & TECHNOLOGY, INC. OF VIRGINIA

Principal Place of Business

12450 FAIR LAKES CIR
SUITE 625
FAIRFAX VA 22033
US

Mailing Address

12450 FAIR LAKES CIR
SUITE 625
FAIRFAX VA 22033
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1993

4. FEI Number

52-1556292

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

WHITMORE, KEN
1300 MAJESTIC OAK DRIVE
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Rd.

83

84 City Plantation

FL

85 Zip Code 33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0505, Florida Statutes.

SIGNATURE

Signature of the corporation and the registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CPT
NAME STAFFORD, EARL W
STREET ADDRESS 7803 SUFFOLK COURT
CITY-ST-ZIP ALEXANDRIA VA 22310

TITLE VC
NAME NORMAN, JOAN
STREET ADDRESS 609 OGDEN DRIVE
CITY-ST-ZIP MT. HOLLY NJ 08060

TITLE DVPS
NAME BALTHROP, SHARON P
STREET ADDRESS 12621 WYCKLOW DRIVE
CITY-ST-ZIP CLIFTON VA 22024

TITLE D
NAME BELFORD, PETER C
STREET ADDRESS 8312 TURNBERRY COURT
CITY-ST-ZIP POTOMAC MD 20854

TITLE CFO
NAME GOTTLIEB, A. M
STREET ADDRESS 270 CHELMSFORD COURT
CITY-ST-ZIP STERLING VA

TITLE COO
NAME RAMBLER, MITCHELL B
STREET ADDRESS 11005 COLONIAL GREEN CT.
CITY-ST-ZIP N POTOMAC MD

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Secretary
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Treasurer
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 exercise the powers of the corporation under Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

A. MICHAEL GOTTLIEB
Chief Financial Officer

2/20/98 703-502-9600

CR2E034 (10/97)