2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9400000822 Susa Management, Inc. Principal Place of Business 10440 LITTLE PATUXENT PARKWAY SUITE 1100 COLUMBIA MD 21044 2. Principal Place of Business 10440 LITTLE PATUXENT PKWY Suite, Apt. #, etc. Suite, Apt. #, e

FILED May 22, 2002 8:00 am Secretary of State

05-22-2002 90093 009 ***150.00



Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
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	, w	<u> </u>				52-1862074		lot Applicable
Zip 21044		Country USA	Zip 21044	Country USA	5. (Certificate of Status Desired	\$8.75 Ad Fee Require	
21044	6 Name	and Address of Current		USA	7N	Name and Address of New Registered		
	oiyanic	and Addiess of Correins	negliatered Agant	Name		Addie Strategic		
© T CORPORATION SYSTEM 1200 S. PINE ISLAND RD.								
					Street Address (P.O. Box Number is Not Acceptable)			
PLANTATI	ion FL 333	24						
				City		F	Zip Cod	e
		·-				40.00		
8. The above	named entit	y submits this statement fo	r the purpose of changing its	s registered office or	registered ag	ent, or both, in the State of Florida.		
SIGNATURE.	-	or printed name of registered agent a		F. Danistand Asset since	us assurized whee re	einstating) DATE		
	Signature, typed	or printed name of registered agent a	and the ir applicable. (NO	TE: Registered Agent signati	ne reduired when te	T OATE		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE					00	10. Election Campaign Financing	¢E (00
Tax filing requirement and elects to do so. After May 1, 2002 Fe					50.00			00 May Be
(See criter	ria on back)		Make Check Paya	ble to Departmen	t of State		_ /1000	
11.	÷	OFFICERS AND	DIRECTORS	12.	AD	DITIONS/CHANGES TO OFFICERS AN	ND DIRECTOF	RS IN 11
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		- 1-8	ALL CITY ALL THE CONTRACT	1	ladia Cartia	110 07(0V)) Florido Ctobres 15 de		information
13. I hereby o	certify that th	e information supplied with	this tiling does not qualify to	or the exemption state	ied in Section	119.07(3)(i), Florida Statutes. I further o	erilly inat the	ii ii ormation

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:

465/2002

410-730-9500

Daytime Phone #