FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003858 (7)

FILED Mar 20 1998 8:00am Secretary of State

1. Corporation ACQUI	ON Name ISITION INVESTMENT COM	PANY, INC.	\	 		JAŘ (()AN (ANA) AN JAN (AN) (BA)
Principal Plac	ce of Business	Mailing Address			AH ONIK BUMA BEHIL ONIK BUH	30 4176 1816 1416 1814 1861
	VILLE ROAD. SUITE 800					
8737 COLESVILLE ROAD. SUITE 800 8737 COLESVILLE ROAD. SUITE 800 SILVER SPRING MD 20910 SILVER SPRING MD 20910						
					NOT WRITE IN THIS	SPACE
				3. Date Incorporated 07/21/1994	or Qualified	
2. Principal Place of Business 2s. Mailing Address			s	4. FEI Number		Applied For
21 26			<u>52-1881285</u>		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		ic.	5. Certificate of Statu	s Desired	\$8.75 Additional Fee Regulred	
27 27			6. Election Campaign	Financina	\$5.00 May Be	
23		28		Trust Fund Contrib	· · ·	Added to Fees
Zip	Country	Zip	Country		ves or has paid the cu	
24	25	29	30	Personal Property		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Addres	s of New Registered	Agent
LUNDSTROM, MATT 81 Name Lu.				LUNDSTROM, MA	·TT	
	47 NORTH WICKHAM ROAD, SU	JITE 118	82 Str	t Address (P.O. Box Number is	Not Acceptable)	
ME	MELBOURNE FL 32935			103 CENTRAL PM	2K DRIVE	
			63			
			84 Ci			85 Zip Code
44 Dura and	to the provisions of Sections 607.05	00 007 4500 51	01-11-11-11-11-11-11-11-11-11-11-11-11-1	IELBOURNE	FL	32935
office or i	registered agent, or both, in the State	e of Florida. Such change	was authorized by the	d corporation submits this states rporation's board of directors. I	nent for the purpose o hereby accept the app	a changing its registered
_	am familiar with, and accept the oblig	ations of, Section 607.05	05, Florida Statutes.			
SIGNATURE	Signature, typed or printed name of registered ag	jon, and tille if applicable.	(NOTE: Registered Agent sign	re required when reinstating)	DATE	
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANG	ES TO OFFICERS AND	D DIRECTORS IN 12
TITLE	VT	☐ DELE	TE 1.1 TITLE			Change Addition
NAME	BOWDITCH, PATRICIA	union and	1.2 NAME			
STREET ADDRESS	8737 COLESVILLE ROAD, SU	HTE 800	1.3 STREET ADDR			
CITY-ST-ZIP	SILVER SPRING MD 20910		1.4 CITY-ST-ZIP			
TITLE	C C DAIGAN MOULANA	☐ DELET	E 21 TITLE			☐ Change ☐ Addition
NAME	EVERNGAM, WILLIAM	IITE OAA	22 NAME			I
STREET ADDRESS	8737 COLESVILLE ROAD, SU SILVER SPRING MD 20910	111E 800	2.3 STREET ADDR			
CITY-ST-ZIP	SILVER SPRING MD 20910	TV nc. co	2. 4 CiTY - ST - ZIP	<u> </u>		TOTAL COLUMN TOTAL
TITLE	DONNELLY, RUTH	DELET		S TA . QUELLY ETC.	LO-T	Change Addition
NAME CIRCU ADDRESS	8737 COLESVILLE ROAD, SU	JITE 800	3.2 NAME	FACQUELINSTEWA 8737 COLGSVILLE	PD #800	
STREET ADDRESS	SILVER SPRING MD 20910	71 C 000	3.3 STREET ADDR	SILVER SPRING	MD. 20910	
CITY-ST-ZIP TITLE	PD	DELET	3.4. CITY-ST-ZIP E 4.1 TITLE	JIVVIK SPETOD	Pro. Police	Change Addition
NAME	BAINUM, STEWART	J. J.C.C.	4.2 NAME			— comingo — racingon
STREET ADDRESS	8737 COLESVILLE ROAD, SU	JITE 800	4.3 STREET ADDRI			
CITY-ST-ZIP	SILVER SPRING MD		4.4 CITY - ST - ZiP			
TITLE	D	☐ DELET		1 (1) (1) (1)	PACADO	thange ☐ Addition
NAME	BAINUM, BARBARA J		5.2 NAME	-03/22/9	0246431 80100201	77
STREET ADDRESS	8737 COLESVILLE ROAD, SU	ITE 800	5.3 STREET ADDRE	***150.0	- 0100E 0. N	E (
CITY-ST-ZIP	SILVER SPRING MD 20910		5.4 CITY-ST-ZIP		<u>~</u>	
TITLE	D	☐ DELET				☐ Change ☐ Addition
NAME	SHREVE, CHRISTINE A.		6.2 NAME		~~	$\cdot \cdot $
STREET ADDRESS	8737 COLESVILLE ROAD, SU	ITE 800	6.3 STREET ADDRE		(﴿)	ン 2172
CITY_ST_7IP	SILVER SPRING MD		E A CITY . CT. 7ID	1	\sim	´ つ\ ´

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address.

Detrice Patricia (Sound DM -

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