2001 UNIFORM BU	FILE			
DOCUMENT # F9400(1. Entity Name HIGHLAND OAKS, INC.	0006070	May 03, 200 Secretary 05-03-2001 90034		
Principal Place of Business	Mailing Address			
C/O NORTHRIDGE CAPITAL. INC. 1025 THOMAS JEFFERSON ST., NW #530 EAST WASHINGTON DC 20007	C/O NORTHRIDGE CAPITAL. INC. 1025 THOMAS JEFFERSON ST NW #530 EAST WASHINGTON DC 20007			

2. Principal Place of Business		3. Mailing Address										
1000 Potomac St., NW		1000 Potomac St., NW				I SONING THE INTEREST BOTH BUILD BUI						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRI	TE IN THIS S	SPACE				
Suite 350 Sui			Suite 350	Suite 350								
City & State Washington, DC Washington, DC Washington, DC			,			FEI Number 52-1900248	3		pplied For ot Applicable			
Zip 20007		Country USA: >	Zip Country 20007 USA			5.	Certificate of Status Desired		\$8.75 Add Fee Require	ditional ed		
	6. Name	and Address of Current R	egistered Agent				Name and Address of New R					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301					Name							
					Street Address (P.O. Box Number is Not Acceptable)							
					City			FL	Zip Cod	le		
8. The above	named entity	submits this statement for	the purpose of changing its	registere	ed office o	r registered a	gent, or both, in the State of Flo	orida.				
CICNIATURE		•										
SIGNATURE .	Signature, typed o	or printed name of registered agent an	d title if applicable. (NOTE	: Registered	Agent signat	ure required when	reinstating)	DATE				
		ble to satisfy its Intangible	FILE NOW!				10. Election Campaign Fin	ancing	\$5.0	00 May Be		
Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2001 Make Check Payable							Trust Fund Contribution	n. 🗆		d to Fees		
11.		OFFICERS AND D	IRECTORS	12.		A	DDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11		
TITLE	P		☐ Delete	TITLE		P			X Change	☐ Addition		
NAME		vain, hasan s		NAME	Ī	Rakhas	hwain Hagan Said	a				
STREET ADDRESS 1025 THOMAS JEFFERSON ST., NW #530E			STRE	ET ADDRESS								
CITY-ST-ZIP	WASHINGTON DC 20007			CITY-	ST-ZIP	1000 Potomac St., NW Suite 350 Washington, DC 20007						
TITLE	S		☐ Delete	TITLE		S	90017 DC 20007		Change	☐ Addition		
NAME	BAKHASHWAIN, HASAN S		NAME		S							
STREET ADDRESS	1025 THOMAS JEFFERSON ST., NW #530E			STREI	Hasan Said Bakhashwain							
CITY-ST-ZIP		ON DC 20007		CITY-	1000 Potomac St., NW Suite350							
TITLE	VP -	The Marian See See	Delete	TITLE	٠٠. وسحه		gton, DC 20007		Change:	Addition		
NAME	ABUJBARA	MUSAI	☐ Detete	NAME		VP			- CS creating	Addition		
STREET ADDRESS			N/ #520E		Abujbara, Musa Ibrahim							
CITY-ST-ZIP	1025 THOMAS JEFFERSON ST., NW #530E WASHINGTON DC 20007				ST-ZIP	1000 Potomac St., NW Suite 350						
TITLE	VP	011 00 20001	☐ Delete	TITLE			gton, DC 20007		[X] Change	Addition		
NAME	JACKSON.	DAVID W	L Detete	NAME		VP			En Change			
STREET ADDRESS	-	MAS JEFFERSON ST., N	NA/ #E20E		T ADDRESS		n, David W.					
CITY-ST-ZIP		ON DC 20007	W #330E		ST-ZIP	1000 P	ombamac St., NW S	Suite 3	350			
TITLE	AS	ON DO 20007	П Рефе	+		Washin	gton, DC 200 0 7		NOT Channe	D Addition		
NAME :	FAY, KEVIN	1	☐ Delete	TITLE		AS			🔀 Change	☐ Addition		
STREET ADDRESS			NA AEOOE		T ADDRESS	Bay, Ke						
CITY-ST-ZIP		Mas Jefferson St., N On DC 20007	¥¥ #53UE		ST-ZIP	1000 Pd	otomac St., NW S	Suite 3	350	1		
TITLE	T	OIT DO LUUUI	☐ Delete	TITLE		Washing	yton, DC-20007		Chance	Addition		
NAME	ABUJBARA	MUSA I	☐ Delete	NAME		T			Change	Addition		
STREET ADDRESS			W MEDOE			Abujbai	ra, Musa Ibbahim					
CITY-ST-ZIP		IAS JEFFERSON ST., N	¥733UE		T ADDRESS ST-ZIP		otomac St., NW S	Suite 3	50			
	WASHINGI	ON DC 20007	1 400	UIII-		Washiot	on DC 20007 119.67(3)(i), Florida Statutes. I					
indicated	ertity that the on this report	information supplied with the or supplemental report is tr	is tiling does not qualify for ue and accurate and that m	the exen y signatu	nption stat Jre shall h	ed in Section ave the same	119.07(3)(i), Florida Statutes. I legal effect as if made under o	further certilath; that I ar	fy that the in m an officer	nformation 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR