FOR PROFIT CORPORATION

U	MIFORM BUSINE	SS REPOR	T (U	BR)	·			
DOCUMENT # F94000006070 1. Entity Name					TIÊD FILÊD			
DO NOT WRITE IN THIS SPACE					02 APR 26 PM I2: 59 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business 1000 Potomac Street NW 1000 Potom			ress Omac Street NW					
Suite, Apt Suite		Suite, Apt. #, etc. Suite 350			DO NOT WRITE IN THIS SPACE			
City & Star Washin	gton, DC	City & State Washington, DC			4. FEI Number Applied For 521900248 Not Applied For			
Zip Country 20007 USA		Zip Country		niry	5. Certificate of Status Desired	X	\$8.7	Not Applicable 75 Additional
20007	USA	20007	USA		7. Name and Address of Current Re			Required
:				Name	ration Service Company	groteree	r ng¢i	<u></u>
DO NOT WRITE IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable)				
				1201 Hays	Street			
ı				0				
				City Tallaha		FL	Zi	ip Code 32301
8. The above	named entity submits this statement for t	he purpose of changing its	s registere	ed office or registere	ed agent, or both, in the State of Florid	a.		
SIGNATURE	Signature, typed or printed name of registered agent and	Hille if applicable (NO	If: Registeres	d Agent signature required	ukan caineruhan			
9. This corporation is eligible to satisfy its Intangible January 1 - May 1 Fee is \$150.					woen reassaring)	DATE		
Tax filing r	requirement and elects to do so.	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of Sta			10. Election Campaign Finance Trust Fund Contribution.	cing		\$5.00 May Be Added to Fees
11.	OFFICERS AND D	<u> </u>						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S Hasan Said Bakhashwain 1000 Potomac Street NW Washington, DC 20007	, Suite 350		į	2000054516925 -05/06/0201006017 ****158.75 ****158.75			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T Musa Ibrahim Abujbara 1000 Potomac Street NW Washington, DC 20007	, Suite 350		i				
NAME STREET ADDRESS CITY-ST-ZIP	VP David W. Jackson 1000 Potomac Street NW Washington, DC 20007	Suite 350			DO NOT W	/RI	TE	
NAME STREET ADDRESS CITY-ST-ZIP	AS Kevin J. Fay 1000 Potomac Street NW, Washington, DC 20007	Suite 350			IN THIS SPACE			
TITLE NAME STREE1 ADDRESS CITY-ST-ZIP				I ADDRESS ST- ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			CITY-S	l,				
13. Thereby or	ertify that the information supplied with thi	s filing does not qualify for	r the even	notion stated in Soci	tion 110 07/2)(i) Florido Statuto - 16			11

Thereby certify that the information supplied with this filling 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 on an attachment with an address, with all other the empowered.

SIGNATURE David W. Jackson, _ David W. Jackson, Vice President 04/22/02

Date

(202)626-7890



Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madame:

Please find enclosed for filing the For Profit Corporation Uniform Business Report (UBR) form for Richland Properties, Inc. I have also enclosed a check made out to the Florida Department of State for the requisite filing fee, along with an additional \$8.75 for a Certificate of Status. Should you have any questions or concerns feel free to contact me at the information below, or the through our registered agent, the Corporation Service Company, 1201 Hays Street, Tallahassee, FL 32301. Thank you.

Sincerely,

Amy Palmer

Corporate Group Administrator