

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

96 NOV 22 PM 2:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F95000002962

1. Corporation Name

MRJ GROUP, INC.

Principal Place of Business

10560 ARROWHEAD DR.
FAIRFAX VA 22030-7305

Mailing Address

10560 ARROWHEAD DR.
FAIRFAX VA 22030-7305

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
n/a

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable
n/a

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/19/1995

5. FEI Number

54-1084758

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
C	DRIESSEN, J. KENNETH	401 12TH STREET, SOUTH, #2111	ARLINGTON VA 22202
D	HUFFSTUTLER, ROBERT M	812 CROOKED CROW LANE	GREAT FALLS VA 22086
D	KUSHNER, HARVEY D	5450 WHITLEY PARK TERR., UNIT 61	BETHESDA MD 20814
P	MCMAHON, EDWARD P	8224 INVERNESS HOLLOW TERRACE	POTOMAC MD 20854
V	FARRELL, ROBERT M	11611 AUBURN GROVE COURT	RESTON VA 22094
S	MILLIGAN, WILLIAM J	3304 SADDLESTONE COURT	OAKTON VA 22124

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name
n/a

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

608882014456-8
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***245-88-1888245-80
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of
Registered Agent

Laura R. Dulap

REGISTERED AS AGENT
REGISTERED AGENT MUST SIGN

Date

11-22-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

William J. Milligan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
William J. Milligan, Treasurer and CFO

10/21/96 (703) 277-1706

Date

Daytime Phone #