

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000003080 (7)

1. Corporation Name

SOZA INTERNATIONAL, LTD. (CORPORATION)



Principal Place of Business

8550 ARLINGTON BLVD
FAIRFAX VA 22031

Mailing Address

8550 ARLINGTON BLVD
FAIRFAX VA 22031

3. Date Incorporated or Qualified

06/26/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CCEO ☐ DELETE
NAME SOZA, WILLIAM
STREET ADDRESS 2307 LOCUS RIDGE CT
CITY-STATE-ZIP FALLS CHURCH VA 22046

1.1 TITLE S ☐ Change ☒ Addition
1.2 NAME ELSAYED, JEHAN
1.3 STREET ADDRESS 6916 MCLEAN PARK MANOR CT.
1.4 CITY-STATE-ZIP MCLEAN, VA 22101

TITLE PCOO ☐ DELETE
NAME LARMER, JOHN W II
STREET ADDRESS 8407 WELLER AVE
CITY-STATE-ZIP MCLEAN VA 22102

2.1 TITLE CCEO ☒ Change ☐ Addition
2.2 NAME SOZA, WILLIAM
2.3 STREET ADDRESS 2307 LOCUS RIDGE CT
2.4 CITY-STATE-ZIP FALLS CHURCH VA 22046

TITLE VT ☐ DELETE
NAME PFLUGER, KURT A
STREET ADDRESS 9003 MEARS ST
CITY-STATE-ZIP FAIRFAX VA 22031

3.1 TITLE V ☒ Change ☐ Addition
3.2 NAME PFLUGER, KURT A
3.3 STREET ADDRESS 9003 MEARS ST
3.4 CITY-STATE-ZIP FAIRFAX VA 22031

TITLE VS ☒ DELETE
NAME ELSAYED, IBRAHIM S
STREET ADDRESS 6916 MCLEAN PARK MANOR CT
CITY-STATE-ZIP MCLEAN VA 22101

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE V ☐ DELETE
NAME WEST, RALPH R
STREET ADDRESS 5012 RIDGEMONT RD
CITY-STATE-ZIP ALEXANDRIA VA 22312

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William Soza, Chairman

Date

4/16/96

Daytime Phone #

(703) 560-9477

CR2E034 (12/95)