

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90150 032 ***150.00

DOCUMENT # F95000003080

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



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1995

4. FEI Number

54-1737342

Applied For

Not Applicable

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 owes the current year intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

TITLE CCEO ☐ DELETE

NAME SOZA, WILLIAM
STREET ADDRESS 1909 ORMAND CT
CITY-STATE-ZIP FALLS CHURCH VA 22043

TITLE PCOO ☐ DELETE

NAME LARMER, JOHN W II
STREET ADDRESS 8409 WELLER AVE
CITY-STATE-ZIP MCLEAN VA 22102

TITLE VT ☐ DELETE

NAME PFLUGER, KURT A
STREET ADDRESS 12860 WILLIAMS MEADOW CT
CITY-STATE-ZIP HERNDON VA 20171

TITLE S ☐ DELETE

NAME ELSAYED, JEHAN
STREET ADDRESS 6916 MCLEAN PARK MANOR CT
CITY-STATE-ZIP MCLEAN VA

TITLE V ☐ DELETE

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE President ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

V.P. & Chief Operating Off.
Brian J. O'Connor
20736 Waterfall Branch Terrace
Sterling, VA 20165

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07, 3(f), 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, with a letter like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99

Date

(703)

Daytime Phone #

560-1870

CR2E034 (1/98)