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

Mailing Address

STE 400

7927 JONES BRANCH DR

MCLEAN VA 22102-3305

2a. Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

7927 JONES BRANCH DR

2. Principal Place of Business

MCLEAN VA 22102

**STE 400** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 04 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

03/04/1996

3. Date Incorporated or Qualified

07/21/1995

4. FEI Number

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9500003526 (9)

GARCIA CONSULTING, INC.

21			26					52-1448710		No	ot Applicable	
22	Suite, Apt #	, etc	Suite, Ap	ot. #, etc.	****			5. Certificate of Status Desired		\$8.75 / Fee Re		
	City & State		City & S	tate	·································			6. Election Campaign Financin	g	\$5.00	May Be	
23			28					Trust Fund Contribution		Added		
	Zip	Country	Zip		Cour	ntry		8. This corporation has liability			. 199.032,	
24		25	[29]		30			Florida Statutes	Yes			
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
C T CORPORATION SYSTEM						of Name						
1200 SOUTH PINE ISLAND ROAD						82 Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324						83						
					İ	33						
					ļ	84	City		FL	<b>85</b> Zip	Code	
	rh	10	1607 1600	Florida Otatuta	45					ahanalaa li	to registered	
11	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.											
SI	GNATURE .	Styr abus. Typed or printed name of logistered agon	t and tille if annicable	/NOT	Registered	l Aner	nt signature tegu	ired when reinstating)	DATE			
12		OFFICERS AND		. (10.1	13.	7,90	. 0.9 10.000	ADDITIONS/CHANGES TO C		DIRECTOR	3S IN 12	
TIT		P		DELETE	1.1 101	LE				Change	Addition	
NA	ME	GARCIA JR. ARTHUR F			1.2 NA	ME						
ST	REET ADDRESS	15244 FALCONBRIDGE TERRA	CE		1.3 STI	REET	ADDRESS					
CIT	Y - \$1 - ZIP	GAITHERSBURG MD			1.4 CIT							
711		V		DELETE	2.1 TIT	LE		native series		Change	Addition	
NA	ME	WOOD, CAROL M			2.2 NA	ME						
ST	REET ADDRESS	8360 GREENSBORO DR., #212	2		2.3 ST	REET	ADDRESS					
Cit	Y-ST-ZIP	MCLEAN VA			2. 4 CI	ITY-S	7 - ZIP					
717	LE	V		DELETE	3.1 7/7	LE				Change	Addition	
NA	ME	SCHELLER, GERARD C			3.2 NA	ME		***				
STI	REET ADDRESS	23 MERCY COURT			3.3 ST	REET	ADDRESS					
CII	IY-ST-ZIP	POTOMAC MD			3.4. CI	ITY-S	T-ZIP					
TIT	l.E	V	[	DELETE	4.1 TIT	TLE.	V:	ice President		Change	■ Addition	
NA	ME	ECK, PHILLIP M			4. 2 N/	AME		hillip, M. Eck				
SI	REET ADORESS	7584 THURSTON LANE			4.3 ST	REET		6565 Pebblebrook	P1.			
01	Y-ST-ZIP	MANASSAS VA			4.4 CI	TY-SI		terling, VA 2016				
TH	LF			DELETE	5.1 111	LE			· ·	Change	Addition	
NA	ME				5.2 NA	ME						
ST	REET ADORESS				5.3 ST	REET.	ADDRESS					
CII	IY-ST-ZIP	wy pary a managama and a sagarana and a gama a managama a managama a managama a managama a managama a managama			5.4 CI		T-ZIP					
111	LE			DELETE	6.1 T(T	TLE				☐ Change	Addition	
NA	ME				6.2 NA	AME		9				
ST	REET ADDRESS				6.3 ST	REET	ADDRESS	• ;				
	IY-ST-ZIP				6.4 CI							
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this aimust report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.												