

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90189 014 ***550.00

0621276 AT

DOCUMENT # F95000004333

1. Entity Name
DTX, INC.



Principal Place of Business
1800 PENN STREET, STE. 1
MELBOURNE FL 32901
US

Mailing Address
~~1355 PICCARD DRIVE, STE. 200~~
~~ROCKVILLE MD 20850~~



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1800 Penn St

Suite 1

Melbourne FL

32901

Brevard

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 52-1940406

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WU, JOHN J
10506 Tanager Lane
POTOMAC MD 20854 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Lindner, Norman
1800 Penn St Suite 1
Melbourne FL 32901 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SCHMITT, ARTHUR
1355 PICCARD DRIVE, STE. 200
ROCKVILLE MD 20850 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
Schmitt, Arthur
1800 Penn St #1
Melbourne FL 32901 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
GAROFALO, EUGENE
1355 PICCARD DRIVE, STE. 200
ROCKVILLE MD 20850 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Garofalo, Eugene
1800 Penn St Suite 1
Melbourne FL 32901 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
DICK, DOUGLAS C
1355 PICCARD DRIVE, STE. 200
ROCKVILLE MD 20850 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Pruitt, James
1800 Penn St Suite 1
Melbourne FL 32901 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Poliner, Randall
1800 Penn St Suite 1
Melbourne FL 32901 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Kistake, Jonathan
1800 Penn St Suite 1
Melbourne FL 32901 ☐ Change ☒ Addition

12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ARTHUR SCHMITT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/03 321 728
0172 x40

CR2E034 (10/02)