## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000001837

Entity Name: OAO TECHNOLOGY SOLUTIONS, INC

FILED Apr 23, 2009 Secretary of State

		5111102001 0020110110, 1111	<b>O</b> .			
Current Principal Place of Business:			New Principal Place of Business:			
16TH FLO	ENWAY CENT OR ELT, MD 2077					
Current Mailing Address:			New Maili	New Mailing Address:		
16TH FLO	ENWAY CENT OR ELT, MD 2077					
FEI Number: 52-1973990 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
1201 HAY	ATION SERVIO S STREET SSEE, FL 323					
	e named entity : e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electror	nic Signature of Registered Ag	jent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	HAZELL, CHRI	AY CENTER DR	Title: Name: Address: City-St-Zip:	HAZELL, CHR	WAY CENTER DR 16TH FLOOR	
Title: Name: Address: City-St-Zip:	D ( ) LEHMAN, JOHN 4500 PARK AV NEW YORK, N	E	Title: Name: Address: City-St-Zip:	LEHMAN, JOH	E 6TH FLOOR	
Title: Name: Address: City-St-Zip:	RATTNER, DAV	/AY CTR DR 16TH FL	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	REID, HUBERT	AY CENTER DRIVE	Title: Name: Address: City-St-Zip:	REID, HUBER	WAY CENTER DRIVE 16TH FLOOR	
Title: Name: Address: City-St-Zip:	FUCHS, SIDNE	AY CENTER DRIVE	Title: Name: Address: City-St-Zip:	FUCHS, SIDN	WAY CENTER DRIVE 16TH FLOOR	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID L RATTNER S 04/23/2009