

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

000959

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90148 036 ***150.00

DOCUMENT # F97000001041

1. Corporation Name

ASTROTECH SPACE OPERATIONS, INC.

Principal Place of Business

1595 SPRING HILL ROAD
VIENNA VA 22182

Mailing Address

1595 SPRING HILL ROAD
VIENNA VA 22182

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1997

4. FEI Number

54-1836653

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

21 300 "D" Street, SW

Suite, Apt. #, etc.

22 Suite 814

City & State

23 Washington DC

Zip Country

24 20024 25

2a. Mailing Address

26 300 "D" Street SW

Suite, Apt. #, etc.

27 Suite 814

City & State

28 Washington DC

Zip Country

29 20024 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 PD ☐ DELETE

NAME LEE, CHESTER M
STREET ADDRESS 1595 SPRING HILL ROAD SUITE 3600
CITY-ST-ZIP VIENNA VA 22182

TITLE V ☐ DELETE

NAME BAKER, GEORGE
STREET ADDRESS 1595 SPRING HILL ROAD SUITE 3600
CITY-ST-ZIP VIENNA VA 22182

TITLE VT ☐ DELETE

NAME GRAYSON, MARGARET E
STREET ADDRESS 1595 SPRING HILL ROAD SUITE 3600
CITY-ST-ZIP VIENNA VA 22182

TITLE S ☐ DELETE

NAME DAWSON, WILLIAM S
STREET ADDRESS 1595 SPRING HILL ROAD SUITE 3600
CITY-ST-ZIP VIENNA VA 22182

TITLE COB ☐ DELETE

NAME HARRISON, SHELLEY A
STREET ADDRESS 1595 SPRING HILL ROAD SUITE 3600
CITY-ST-ZIP VIENNA VA 22182

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 300 "D" Street, SW, #814
1.4 CITY-ST-ZIP Washington DC 20024

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 300 "D" Street, SW, #814
2.4 CITY-ST-ZIP Washington DC 20024

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Kissman, Mark
3.3 STREET ADDRESS 300 "D" Street, SW, #814
3.4 CITY-ST-ZIP Washington DC 20024

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS 300 "D" Street, SW, #814
4.4 CITY-ST-ZIP Washington DC, 20024

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS 300 "D" Street, SW, #814
5.4 CITY-ST-ZIP Washington, DC, 20024

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)