PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700002233

L-3 COMMUNICATIONS CORPORATION

Principal Place of Business	Mailing Address
800 3RD AVE. NEW YORK NY 10016	600 3RD AVE. NEW YORK NY 10016

May 06, 1999 8:00 am Secretary of State

05-06-1999 90007 035 ***150.00



DO NOT WRITE IN THIS SPACE

	•					3. Date Incorporated or Qualifed 04/28/1997				
2. Principal P	Place of Business	2a. Mailing Address			-+	4. FEI Number		IA	pplied For	
21		26			ł	13-3937436		N	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	Additional lequired		
City & Stat	te	City & State				6. Election Campaign Financing				
23		28				Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	у		8. This corporation owes the curre	•			
24	25	29 30				Personal Property Tax.		Yes	□No	
	9. Name and Address of Currer	it Registered Agent	8	Name		10. Name and Address of New Re	igisterea A	gent		
СТ	("	1401116	and							
	SOUTH PINE ISLAND ROAD		82	2 Street	Address	(P.O. Box Number is Not Acceptate	ole)			
	NTATION FL 33324		8:	, 						
· - "			, o	'						
			84	City			F-1	85 Zip	Code	
		1007 1500 51 11 0		<u>.L</u>		 	<u> FL</u>	ل_ل		
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	12 and 607.1508, Florida Statutes of Florida. Such change was auth	, the above norized by	re-named the corp	d corpora ocration's	ition submits this statement for the p s board of directors. I hereby accept	urpose of cl	hanging its ment as r	s registered eaistered	
	im familiar with, and accept the obliga					. —	PF-416		·	
SIGNATURE										
12	Signature, typed or printed name of registered age			nt signature	required wh	en reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECT	ODC IN 12	
12. TITLE	OFFICERS AND DIRECTORS CD DELETE		13.		т	AUDITIONS/UNANGES TO OFF		Change	Addition	
NAME	LANZA, FRANK C	_ percie	1.2 NAME		{			[_] Gildingo		
STREET ADDRESS	600 3RD AVE.		•	TADORESS						
	NEW YORK NY 10016		l		1					
CITY-ST-ZIP TITLE	PD	□ DELETE	1.4 CITY-: 2.1 TITLE	51-214	 			Change	Addition	
NAME	LAPENTA, ROBERT V	_ +	2.2 NAME		ļ					
STREET ADDRESS	600 3RD AVE.		1	TADDRESS	}					
CITY-ST-ZIP	NEW YORK NY 10016		2.4 CITY-]					
TITLE	V	☐ DELETE	3.1 TITLE	51-DL	-			Change	Addition	
NAME	STRIANESE, MICHAEL T	_	3.2 NAME					_ ,		
STREET ADDRESS	600 3RD AVE.		1	TADDRESS	Ì					
CITY-ST-ZIP	NEW YORK NY 10016		3.4, CITY-	_	1					
TITLE	V	☐ DELETE	4.1 TITLE		 			Change	Addition	
NAME	MEHMEL, ROBERT F		4. 2 NAME							
STREET ADDRESS	600 3RD AVE.	I	4 3 STREE	T ADDRESS	}					
CITY-ST-ZIP	NEW YORK NY 10016	1	4.4 CITY-5							
TITLE	VS	☐ DELETE	5.1 TITLE					Change	Addition	
NAME	CAMBRIA, CHRISTOPHER C		5.2 NAME	ı						
STREET ADDRESS	600 3RD AVE.		5.3 STREE	T ADDRESS						
CITY-ST-ZIP	NEW YORK NY 10016		5.4 CITY-5	T-ZIP						
TITLE	Vī	☐ DELETE	6.1 TITLE					Change	Addition	
NAME	O'BRIEN, LAWRENCE W		6.2 NAME					-		
STREET ADDRESS	600 3RD AVE.		6.3 STREE	TADORESS						
CITY, ST. 7ID	NEW YORK NY 10016		6.4 CITY-5	T-71P]					

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: