

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **F97000003842** ✓

1. Corporation Name

CDSI SOLUTIONS, INC.

Principal Place of Business

**20250 CENTURY BOULEVARD
GERMANTOWN MD 20874**

Mailing Address

**2828 N. HASKELL
10TH FLOOR
DALLAS TX 75204
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1997

4. FEI Number

52-2027391

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.

☐

Yes

☐

No

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 **P** ☒ DELETE
NAME **GREEN, THOMAS**
STREET ADDRESS **ONE CURIE COURT**
CITY-ST-ZIP **ROCKVILLE MD 20850**

TITLE **S** ☐ DELETE
NAME **BLACK, DAVID W**
STREET ADDRESS **2828 N. HASKELL 10TH FLOOR**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **T** ☐ DELETE
NAME **VINEYARD, NANCY P**
STREET ADDRESS **3960 N. CENTRAL EXPRESSWAY**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **D** ☐ DELETE
NAME **RICH, JEFFREY A**
STREET ADDRESS **2828 N. HASKELL 10TH FLOOR**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **D** ☐ DELETE
NAME **HORTENSTINE, HENRY G**
STREET ADDRESS **2828 N. HASKELL 10TH FLOOR**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **S** ☒ DELETE
NAME **BRADLEY, KOPP**
STREET ADDRESS **ONE CURIE COURT**
CITY-ST-ZIP **ROCKVILLE MD 20850**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Robert Woods** ☐ Change ☒ Addition
1.2 NAME **President**
1.3 STREET ADDRESS **One Curie Court**
1.4 CITY-ST-ZIP **Rockville MD 20850**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **Asst Secretary** ☐ Change ☒ Addition
6.2 NAME **Hays Haney**
6.3 STREET ADDRESS **2828 N. Haskell Ave Fl. 10**
6.4 CITY-ST-ZIP **Dallas TX 75204**

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.

SIGNATURE: **Hays Haney, Asst Secretary**

7/1/99

214-841-6197

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

0120350

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90019 007 *1,100.00

