2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000004005 1. Entity Name								FILED May 31, 2000 8:00 am				
ALPHA ON BOARD SALES & services, I							į	Secre	tary	of S	State	
Principal Place of Business Mailing Address								05-31-20	00 90045	032 ***	150.00	
45025 AVIATION DR. SUITE 350 DULLES, VA 20166				45025 AVIATION DR SUITE 350 DULLES, VA 20166								
US 2. Principal Place of Business				US 3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRI	TE IN THIS '	EPACE		
City & State				City & State			4	4. FEI Number Applied For				
Ony & State				Only & State			_				Not Applicable	le
Zip	Country			Zip Co		untry		5. Certificate of Status Desired Fe			8.75 Additional ee Required	
6. Name and Address of Current I							7, 1	Name and Address of New	Registered.	Agent	<u> </u>	7
						Name						_]
CORPORATION SERVICE COMPANY						Street A	ddress (P.O	D. Box Number is Not Accept	able)			
1201 HAYS STREET						×	بالمهام فيحسنك بالشائد و في محاله المناه المائد و المناه					,
I I TYTTYIII	TO O D E	, гл 323	ΟŢ			City			FL	Zip Co	ode	7
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
<u> </u>							_ 1 .				-	┪
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) FILE NOW!!! I After MAY 1, 2000 Make Check Payable						will be \$5	550.00 It of State	<u></u>	on	Ädde	00 May Be d to Fees	
11.	<u> </u>	OFFICERS A	ND DIF		12.		PS	ITIONS/CHANGES TO OFF	ICERS AND			ျှန္တ
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SIDD 4502 DULL	ALL, STUA 5 AVIATIO ES, VA 20	N" D	Delete			KAPI 4502 DULI	AN, PAUL I 25 AVIATION D LES, VA 20166			<u>``</u>	=) CR2E034 (9/99
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TITLE NAME	D DEAS	Y, PATRIC	ΚĠ	Delete	TITLE NAME					Change	Addition	٥
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NAME STREET ADDRESS	OAKL	EY, DAWN 5 AVIATIO			NAMI STRE	E ET ADDRESS	1 ft			1	<u> </u>	
CITY - ST - ZIP	DOHEEC, VII ZOZOO					- ST - ZIP		· .	>			4
TITLE NAME	T .JONA		; TCK	∑ Delete W	TITLE		1. 1.		:	Change	Addition	'
NAME DONAHOE, PATRICK W STREET ADDRESS 45025 AVIATION DR, STE 350 CITY ST - ZIP. DULLES, VA 20166						EET ADDRESS ST - ZIP		The Mark Control	145	. 2		
13. 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 redeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or of an attachment with an address, with all other like empowered.												
SIGNAT	UKE:	SICHATUS	Act l	PRINTED NAME OF SIG	NING OF	FICER OR O	RECTOR	4/11/0	<u> </u>	evtime Pho	ne #	1

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