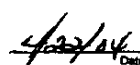


FILED  
Jun 08, 2004 8:00 am  
Secretary of State

05-04-2004 90129 006 \*\*\*150.00

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                       |                                                                                                                                                 |                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # F98000004166</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                       |                                                                |                                                                                                         |
| 1. Entity Name<br><b>MRA SYSTEMS, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                       |                                                                                                                                                 |                                                                                                         |
| Principal Place of Business<br><b>3135 EASTON TURNPIKE<br/>FAIRFIELD, CT 06431</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                       | Mailing Address<br><b>P.O. BOX 2216<br/>STE 300<br/>SCHENECTADY, NY 12301-2216</b>                                                              |                                                                                                         |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                       | 3. Mailing Address                                                                                                                              |                                                                                                         |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                       | Suite, Apt. #, etc.                                                                                                                             |                                                                                                         |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                       | City & State                                                                                                                                    |                                                                                                         |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country                                                                                               | Zip                                                                                                                                             | Country                                                                                                 |
| 6. Name and Address of Current Registered Agent<br><b>CORPORATION SERVICE COMPANY<br/>1201 HAYS STREET<br/>TALLAHASSEE, FL 32301-2525</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                       | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number, is Not Acceptable)<br>City<br><b>FL</b> Zip Code        |                                                                                                         |
| 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing)</small>                                                                                                                                                                                                                            |                                                                                                       |                                                                                                                                                 |                                                                                                         |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2004 Fee will be \$550.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                       | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                          |                                                                                                         |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                       | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                           |                                                                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DV<br>SAMUELS, JOHN M<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>BUNT, JAMES R<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>AMEEN, PHILIP<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | T<br>SEEGAL, RHODA L<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>SEEGAL, RHONDA L</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | AT<br>BUCHANAN, MARK<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | S<br>HEALING, ROBERT E<br>3135 EASTON TURNPIKE<br>FAIRFIELD, CT 06431 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                       |
| 12. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                       |                                                                                                                                                 |                                                                                                         |
| SIGNATURE: <br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                       | BARBARA A. MELITA<br><br><small>Date</small> (518) 433-4338 |                                                                                                         |



F00098-MRA Systems, Inc.

Report Date: 06/02/2004

Federal ID : 52-2063267

Tax Year : 2004 Rpt Mth : 3

| Name                 | Title                    | Business Address                                 |
|----------------------|--------------------------|--------------------------------------------------|
| Arnold Rembold       | Vice President           | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| Barbara A. Melita    | Vice President           | 12 Corporate Woods Boulevard Albany NY 12211 US  |
| Barbara A. Melita    | Assistant Treasurer      | 12 Corporate Woods Boulevard Albany NY 12211 US  |
| Bernard E. Grossman  | Vice President           | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| Eliza W. Fraser      | Assistant Secretary      | 3135 Easton Turnpike Fairfield CT 06828 US       |
| Fernando Ruiz        | Secretary                | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| Frederick Flynn      | Vice President           | 5121 Winnetka Avenue Minneapolis MN 55428        |
| Frederick Flynn      | Secretary                | 5121 Winnetka Avenue Minneapolis MN 55428        |
| Gerald A. Poch       | Executive Vice President | 700 Canal Street Stamford CT 06902               |
| J. Dawn Mayhew       | Assistant Treasurer      | 12 Corporate Woods Blvd Albany NY 12211          |
| J. Dawn Mayhew       | Vice President           | 12 Corporate Woods Blvd Albany NY 12211          |
| James R. Bunt        | President                | 3135 Easton Turnpike Fairfield CT 06431          |
| James R. Bunt        | Director                 | 3135 Easton Turnpike Fairfield CT 06431          |
| John M. Samuels      | Vice President           | 3135 Easton Turnpike Fairfield CT 06431          |
| John M. Samuels      | Director                 | 3135 Easton Turnpike Fairfield CT 06828          |
| Mark E. Buchanan     | Vice President           | 12 Corporate Woods Boulevard Albany NY 12211 US  |
| Mark E. Buchanan     | Assistant Treasurer      | 12 Corporate Woods Boulevard Albany NY 12211 US  |
| Perry Monych         | Executive Vice President | 5121 Winnetka Avenue Minneapolis MN 55428        |
| Phillip D. Ameen     | Director                 | 3135 Easton Turnpike Fairfield CT 06431          |
| Phillip D. Ameen     | Vice President           | 3135 Easton Turnpike Fairfield CT 06431          |
| Pupinder K. Bhutiani | Vice President           | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| Raymond J. Roquemore | Executive Vice President | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| Rhonda L. Seegal     | Treasurer                | 3135 Easton Turnpike Fairfield CT 06431 US       |
| Rhonda L. Seegal     | Vice President           | 3135 Easton Turnpike Fairfield CT 06431 US       |
| Robert E. Healing    | Vice President           | 3135 Easton Turnpike Fairfield CT 06828          |
| Robert E. Healing    | Secretary                | 3135 Easton Turnpike Fairfield CT 06828          |
| Robert G. Stiber     | Executive Vice President | 1 Neumann Way MD J44 Cincinnati OH 45215         |
| Stanley Witkow       | Vice President           | 700 Canal Street Stamford CT 06902 US            |
| Valerie C. French    | Secretary                | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| William E. Heskett   | Vice President           | 102 Chesapeake Park Plaza Baltimore MD 212204201 |
| William W. Booth     | Vice President           | 12 Corporate Woods Blvd. Albany NY 12211         |
| William W. Booth     | Assistant Treasurer      | 12 Corporate Woods Blvd. Albany NY 12211         |

Attachment

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#F98000004146