


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

FILED  
Apr 05, 1999 8:00 am  
Secretary of State

04-05-1999 90023 045 \*\*\*150.00

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| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1999 |  | FLORIDA DEPARTMENT OF STATE<br>Katherine Harris<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # F98000004320

1. Corporation Name

NORTHROP GRUMMAN TECHNICAL SERVICES, INC.

Principal Place of Business  
1840 CENTURY PARK EAST  
LOS ANGELES CA 90067

Mailing Address  
1840 CENTURY PARK EAST  
LOS ANGELES CA 90067



DO NOT WRITE IN THIS SPACE

|  |         |                     |         |  |  |
|--|---------|---------------------|---------|--|--|
| 2. Principal Place of Business   |         | 2a. Mailing Address |         | 3. Date Incorporated or Qualified<br>07/29/1998  |  |
| 21   |         | 26                  |         | 4. FEI Number<br>73-0934115  | Applied For<br>Not Applicable                      |
| Suite, Apt. #, etc.  |         | Suite, Apt. #, etc. |         | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required   |  |
| 22   |         | 27                  |         | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees                          |  |
| City & State   |         | City & State        |         | 8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| 23   |         | 28                  |         |  |  |
| Zip  | Country | Zip                 | Country |  |  |
| 24   |         | 29                  |         |  |  |
| 9. Name and Address of Current Registered Agent                              |         |                     |         | 10. Name and Address of New Registered Agent   |  |
| C T CORPORATION SYSTEM<br>1200 SOUTH PINE ISLAND ROAD<br>PLANTATION FL 33324 |         |                     |         | 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 |                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                 |
| TITLE                      | PD                              | 1.1 TITLE   | PD                              |
| NAME                       | HOBBS, GARY P                   | 1.2 NAME  | Donley, Gregory                 |
| STREET ADDRESS             | 2411 DULLES CORNER PK., STE 800 | 1.3 STREET ADDRESS                                    | 2411 Dulles Corner Pk., Ste 800 |
| CITY-ST-ZIP                | HERNDON VA                      | 1.4 CITY-ST-ZIP                                       | Herndon, VA                     |
| TITLE                      | VT                              | 2.1 TITLE   |                                 |
| NAME                       | MOVIUS, STEPHEN C               | 2.2 NAME  |                                 |
| STREET ADDRESS             | 2411 DULLES CORNER PK., STE 800 | 2.3 STREET ADDRESS                                    |                                 |
| CITY-ST-ZIP                | HERNDON VA                      | 2.4 CITY-ST-ZIP                                       |                                 |
| TITLE                      | V                               | 3.1 TITLE   |                                 |
| NAME                       | CLARK, MARTIN                   | 3.2 NAME  |                                 |
| STREET ADDRESS             | 2411 DULLES CORNER PK., STE 800 | 3.3 STREET ADDRESS                                    |                                 |
| CITY-ST-ZIP                | HERNDON VA                      | 3.4 CITY-ST-ZIP                                       |                                 |
| TITLE                      | S                               | 4.1 TITLE   |                                 |
| NAME                       | MULLAN, JOHN H                  | 4.2 NAME  |                                 |
| STREET ADDRESS             | 1840 CENTURY PARK EAST 13TH FL  | 4.3 STREET ADDRESS                                    |                                 |
| CITY-ST-ZIP                | LOS ANGELES CA                  | 4.4 CITY-ST-ZIP                                       |                                 |
| TITLE                      | AT                              | 5.1 TITLE   |                                 |
| NAME                       | STRODE, DAVID H                 | 5.2 NAME  |                                 |
| STREET ADDRESS             | 1840 CENTURY PARK EAST 13TH FL  | 5.3 STREET ADDRESS                                    |                                 |
| CITY-ST-ZIP                | LOS ANGELES CA                  | 5.4 CITY-ST-ZIP                                       |                                 |
| TITLE                      | AS                              | 6.1 TITLE   |                                 |
| NAME                       | POPE, RALPH K                   | 6.2 NAME  |                                 |
| STREET ADDRESS             | 2411 DULLES CORNER PK, STE 800  | 6.3 STREET ADDRESS                                    |                                 |
| CITY-ST-ZIP                | HERNDON VA                      | 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 REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/22/99

Date

(310)201-3393

Daytime Phone #

CR2E034 (1/1/98)