2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004882

1. Entity Name
USGEN HOLDINGS, INC.

FILED
02 APR -5 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
SUITE 13 FLOOR 7500 OLD GEORGETOWN ROAD BETHESDA MD 20814	SUITE 13 FLOOR 7500 OLD GEORGETOWN ROAD BETHESDA MD 20814

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 94-3282136 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name Street Address (P.O. Box Number is Not Acceptable) 100000529090 1---6 -04717702--01087--001 ***3171.25 ****158.75 City FL 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent s gnature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PCED	☐ Delete	TITLE	S/D	☐ Change ☒ Addition
NAME	IRIBE, P.C.		NAME	HARTMAN, SANFORD L.	
STREET ADDRESS	7500 OLD GEORGETOWN ROAD		STREET ADDRESS	7500 OLD GEORGETOWN ROAD	
CITY-ST-ZIP	BETHESDA MD 20814-6161		CITY-ST-ZIP	BETHESDA, MD 20814-6161	
TITLE	V	☐ Delete	TITLE	AT	☐ Change ☒ Addition
NAME	COOPER, JOHN R		NAME	J. TRACY MEY	
STREET ADDRESS	7500 OLD GEORGETOWN ROAD		STREET ADDRESS	7500 OLD GEORGETOWN ROAD	
CITY-ST-ZIP	BETHESDA MD 20814-6161		CITY-ST-ZIP	BETHESDA, MD 20814-6161	
TITLE	T	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BASSETT, DAVID N		NAME		
STREET ADDRESS	7500 OLD GEORGETOWN ROAD		STREET ADDRESS		
CITY-ST-ZIP	BETHESDA MD 20814-6161		CITY-ST-ZIP		
TITLE	AS	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	MEIER, PETER E		NAME	158.75	
STREET ADDRESS	7500 OLD GEORGETOWN ROAD		STREET ADDRESS		
CITY-ST-ZIP	BETHESDA MD 20814-6161		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 receiver 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 on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE J. TRACY MEY, ASST. TREASURER 3-15-02 301-280-6800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)

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