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1. Name	and Mailing Add	dress DOC	UMEN				I SLUK TALLA	CIÁRT U WASSEE, F	STATE LORIDA	
		• •					1a. Principal Pl	lace of Business	Address	
	8227 OL	ARC MANAO D COURTHOU VA 22182				100		LD COURT VA 2218		E ROAD, SU
2 Principal Place of Business 2a. Mai			ling Address			3. Dale Organiz	zed or Qualified	3a. State	of Formation	
Cuito An	i ii olo		Suito A	Apt. #, etc.			07/06/1998		VA	
Suite, Apt. #, etc.							4. FEI Number			Applied For
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WHIT	E, WILT	and Address of Curre	ent Registered			8. I Name	Name and Addres	ss of New Regis	sa.75 Addi	tional Fee Required
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SIGNATURE: Stunder M. Bary Sr. V. P. Stanley M. Barg 2/24/99 @703-760-9500

1 Ido hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and the item is signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes; and that my name appears in Block 10, or on an