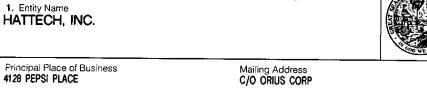
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P00000051034

1. Entity Name HATTECH, INC.

CHANTILLY VA 20151



1401 FORUM WAY SUITE 400

FILED Jan 17, 2003 8:00 am Secretary of State

01-17-2003 90140 029 ***150.00

20011972

| WEST PALM BEACH FL 33401 | | | | | | | | |
|---|--|--|-----------------------------|-------------------------------|--|---|------------------------------------|---------------------------|
| 2. Principal Place of Business | | | 3. Mailing Address | | | 1 180 11 66) 11 10 111 10 1111 10 111 10 1111 10 111 10 1111 10 111 10 1111 10 111 10 1111 10 111 10 1111 10 11111 10 1111 10 1111 10 1111 10 1111 10 1111 10 1111 | # | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | |
| City & State | | | City & State | | 4. | FEI Number 65-1010464 | | Applied For |
| Zip | . С | ountry | Zip | Country | 5. | Certificate of Status Desired | \$8.75 Ac | dditional |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New Registered Agent | | | |
| OT CORROBATION EVETTA | | | | | Name | | | |
| CT CORPORATION SYSTEM | | | | Street Ad | Street Address (P.O. Box Number is Not Acceptable) | | | |
| 1200 S PINE ISLAND RD | | | | | | | | |
| PLANTATION FL 33324 | | | | | | | | |
| | | | | | City FL Zip Code | | | |
| 8. The abov | e named entity sub ations of registered | omits this statement for th | e purpose of changing its | registered office or r | registered ac | gent, or both, in the State of Florida. I ar | n familiar with | and accept |
| _ | | agent. | | | | | | |
| SIGNATURE | Single Annual Control | | | | | | | |
| | | ted name of registered agent and t | itle if applicable. (NOTE | : Registered Agent signature | e required when r | einstating) DATE | | |
| 73 | FILE NOW!!! FI | | | | | Election Campaign Financing | ¢E . | 00 |
| | | ee will be \$550.00 rida Department of St | ata | | | | | 00 May Be ed to Fees |
| 10. | | OFFICERS AND DIR | | U 44 | | | | |
| TITLE | ID | OF TOERS AND DIR | Delete | 11. | AL | ODITIONS/CHANGES TO OFFICERS AN | | |
| NAME | BLAKE, RONAL | DL | □ Delete | NAME | | | ☐ Change | ☐ Addition |
| STREET ADDRESS | 1401 FORUM V | | | STREET ADDRESS | | • | | |
| CITY-ST-ZIP | WEST PALM BE | EACH FL 33401 | | CITY-ST-ZIP | | | | İ |
| TITLE | PD | 10.11 | ☐ Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME STREET ADDRESS | ASTORGA, JUL 21336 FLATWO | | | NAME | | | | |
| CITY-ST-ZIP | STERLING VA 2 | | | STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE | AVPD | | □ Delete | TITLE | | | | · =: |
| NAME | KOBS, MARTIN | j | □ Delete | NAME | | | Change | ☐ Addition |
| STREET ADDRESS | 1401 FORUM W | | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | WEST PALM BE | ACH FL 33401 | | CITY-ST-ZIP | | | | |
| TITLE | IP | | ☐ Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME STREET ADDRESS | ASTORGA, JULI 1401 FORUM W | IU H /∆Y <i>#4</i> ∩∩ | | NAME | • | | | ļ |
| CITY-ST-ZIP | WEST PALM BE | ACH FL 33401 | | STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE | D | | ☐ Delete | TITLE | | | | |
| | FROETSCHER, I | | D Delete | NAME | | | Change | ☐ Addition |
| STREET ADDRESS | 1401 FORUM W | /AY #400 | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | WEST PALM BE | ACH FL 33401 | | CITY-ST-ZIP | | | | |
| TITLE | | | ☐ Delete | TITLE | | | Change | Addition |
| NAME STREET ADDRESS | | | | NAME | | | • | |
| CITY-ST-ZIP | | | | STREET ADDRESS CITY-ST-ZIP | | | | |
| 12. i hereby o | L certify that the infor | mation supplied with this | filing does not qualify for | be everation state of | lin Costley 4 | 19.07(3)(i), Florida Statutes. I further ce | | |
| indicated | on this report or su | ipplemental report is true | and accurate and that my | / signature shall have | e the same l | (19.07(3)(i), Florida Statutes. I further ce egal effect as if made under oath; that I | rtify that the ir am an officer | ntormation 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: _