2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000124976

City-St-Zip:

BOCA RATON, FL 33487

Entity Name: MANT USA-FLORIDA, INC.

FILED Apr 30, 2008 Secretary of State

| Littly Na | ME. WANT OSA-I LORIDA, INC. | | | |
|--|---|---|--|--|
| Current Principal Place of Business: | | New Principal Place of | New Principal Place of Business: | |
| 7700 CONGRESS AVENUE, SUITE 1122 BOCA RATON, FL 33487 | | SUITE 1122 | 7700 CONGRESS AVENUE SUITE 1122 BOCA RATON, FL 33487 | |
| Current M | lailing Address: | New Mailing Address: | New Mailing Address: | |
| 7700 CONGRESS AVENUE, SUITE 1122 BOCA RATON, FL 33487 | | SUITE 1122 | 7700 CONGRESS AVENUE SUITE 1122 BOCA RATON, FL 33487 | |
| FEI Number | : FEI Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of N | Name and Address of New Registered Agent: | |
| 2295 NW SUITE 117 BOCA RA | STEVEN H ESQ CORPORATE BLVD 7 TON, FL 33431 US e named entity submits this statement for the e of Florida. | e purpose of changing its registered of | ffice or registered agent, or both, | |
| SIGNATU | RE: | | | |
| | Electronic Signature of Registered A | ∖ gent | Date | |
| Election Ca | mpaign Financing Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () Delete IZOLT, JAMES 7700 CONGRESS AVENUE, SUITE 1122 BOCA RATON, FL 33487 | Title: () Name: Address: City-St-Zip: | Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete ALEA, R. ANTHONY 7700 CONGRESS AVENUE, SUITE 1122 BOCA RATON, FL 33487 | Title: () Name: Address: City-St-Zip: | Change () Addition | |
| Title: Name: | D () Delete TESTORF, KAI 7700 CONGRESS AVENUE, SUITE 1122 | Title: () Name: Address: | Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: R. ANTHONY ALEA D 04/30/2008