## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P31873

**Current Principal Place of Business:** 

**Entity Name: MASTECH SYSTEMS CORPORATION** 

FILED Jan 07, 2003 Secretary of State

**New Principal Place of Business:** 

680 ANDERSEN DR PARKRIDGE ONE FOSTER PLAZA 10 1000 COMMERCE DR, 5TH FL PITTSBURGH, PA 15220 US PITTSBURGH, PA 15275 **Current Mailing Address:** New Mailing Address: 680 ANDERSEN DR PARKRIDGE ONE FOSTER PLAZA 10 1000 COMMERCE DR, 5TH FL PITTSBURGH, PA 15220 PITTSBURGH, PA 15275 US FEI Number: 25-1529755 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD US

PLANTATION, FL 33324

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST ( ) Delete Title: PDT (X) Change ( ) Addition TRIVEDI, ASHOK, Name: Name: TRIVEDI, ASHOK, 680 ANDERSEN FOSTER PLAZA 10 680 ANDERSEN FOSTER PLAZA 10 Address: Address: City-St-Zip: PITTSBURGH, PA 15220 City-St-Zip: PITTSBURGH, PA 15220

Title: CD () Delete Title: () Change () Addition WADHWANI, SUNIL, Name: Name:

680 ANDERSEN FOSTER PLAZA 10 Address: Address: PITTSBURGH, PA 15220 City-St-Zip: City-St-Zip:

Title: Title: VCFO () Delete () Change () Addition ZUGAY, MICHAEL Name: Name:

680 ANDERSEN FOSTER PLAZA 10 Address: Address: City-St-Zip: PITTSBURGH, PA 15220 City-St-Zip:

Title: () Delete Title: ( ) Change (X) Addition DAUGHERTY, DANIEL Name: Name: Address: Address: 1000 COMMERCE DR, 5TH FL City-St-Zip: City-St-Zip: PITTSBURGH, PA 15275 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: MICHAEL ZUGAY **VCFO** 01/07/2003