


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P33277 (5)			
1. Corporation Name PERSTORP ANALYTICAL, INC.			
Principal Place of Business 12101 TECH RD SILVER SPRING MD 20904		Mailing Address 12101 TECH RD SILVER SPRING MD 20904	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 8751 W. BROWARD BLVD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS			
TITLE	P	<input checked="" type="checkbox"/> DELETE	
NAME	LINDBLAD, NILES V		
STREET ADDRESS	3747 NORTH MERIDIAN ROAD		
CITY-ST-ZIP	ROCKFORD IL		
TITLE	EVPC	<input type="checkbox"/> DELETE	
NAME	WEBSTER, DONALD R		
STREET ADDRESS	6403 FOREST MILL LANE		
CITY-ST-ZIP	LAUREL MD		
TITLE	VPTS	<input type="checkbox"/> DELETE	
NAME	DWYER, JUDITH R		
STREET ADDRESS	14601 PEBBLE HILL LANE		
CITY-ST-ZIP	GAITHERSBURG MD		
TITLE	VPS	<input checked="" type="checkbox"/> DELETE	
NAME	MCCARTHY, JOHN J		
STREET ADDRESS	2023 MALEADY DRIVE		
CITY-ST-ZIP	HERNDON VA		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME	Donald R. Webster		
1.3 STREET ADDRESS	6403 Forest Mill Lane		
1.4 CITY-ST-ZIP	Laurel, MD 20707		
2.1 TITLE	VP/Finance	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME	Judith R. Dwyer		
2.3 STREET ADDRESS	14601 Pebble Hill Lane		
2.4 CITY-ST-ZIP	Gaithersburg, MD 20878		
3.1 TITLE	NONE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	NONE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Judith R. Dwyer



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/21/1991	
4. FEI Number 84-0686936	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

CR2E034 (10/97)

4/29/98 301-680-7258