2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38656

Entity Name: EPLUS GROUP, INC.

Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13595 DULLES TECHNOLOGY DRIVE HERNDON, VA 20171

Current Mailing Address: New Mailing Address:

13595 DULLES TECHNOLOGY DRIVE HERNDON, VA 20171

FEI Number: 54-1569467 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:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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: () Delete Title: (X) Change () Addition

BOWEN, BRUCE M., BOWEN, BRUCE M., Name: Name: 10895 LAKE WINDEMERE DR Address: Address:

13595 DULLES TECHNOLOGY DRIVE

City-St-Zip: GREAT FALLS, VA City-St-Zip: HERNDON, VA 20171

Title: Title: () Delete (X) Change () Addition NORTON, PHILLIP G NORTON, PHILLIP G Name:

Name: 11160 CHAIN BRIDGE ROAD 13595 DULLES TECHNOLOGY DRIVE Address: Address:

City-St-Zip: MCLEAN, VA City-St-Zip: HERNDON, VA 20171

Title: Title: (X) Change () Addition () Delete PARKHURST, KLEYTON PARKHURST, KLEYTON Name: Name:

13595 DULLES TECHNOLOGY DRIVE 1348 LANCIA DR Address: Address:

City-St-Zip: MCLEAN, VA 22100 City-St-Zip: HERNDON, VA 20171

Title: CFO () Delete Title: CFO (X) Change () Addition MENCARINI, STEVEN J MENCARINI, STEVEN J Name: Name:

Address: 1921 BATTEN HOLLOW ROAD Address: 13595 DULLES TECHNOLOGY DRIVE

City-St-Zip: City-St-Zip: VIENNA, VA 22182 HERNDON, VA 20171

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

SIGNATURE: STEVEN J. MENCARINI **CFO** 04/25/2006