

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002208

Entity Name: PLEXUS SCIENTIFIC CORPORATION**Current Principal Place of Business:**5510 CHEROKEE AVE
SUITE 350
ALEXANDRIA, VA 22312**Current Mailing Address:**5510 CHEROKEE AVE
SUITE 350
ALEXANDRIA, VA 22312 US**FEI Number:** 22-2786256**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title	DIRECTOR, PRESIDENT
Name	CAIN, JACQUELIN
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	VP, S, D, GERALD COUNSEL
Name	BELL, DAVID
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	D
Name	MCCRORY, MICHAEL
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	D
Name	CARELLAS, GEORGE
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	D
Name	MEEKINS, WARREN
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	T
Name	EDWARDS, LAMAR
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

Title	DIRECTOR
Name	SADRIEH, ALI
Address	5510 CHEROKEE AVE SUITE 350
City-State-Zip:	ALEXANDRIA VA 22312

I hereby 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 all other like empowered.

SIGNATURE: DAVID E. BELL**SECRETARY****04/04/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date