

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006394

Entity Name: OCEUS NETWORKS INC.

Current Principal Place of Business:

1895 PRESTON WHITE DR.
SUITE 300
RESTON, VA 20191

Current Mailing Address:

1895 PRESTON WHITE DR.
SUITE 300
RESTON, VA 20191 US

FEI Number: 25-1744631

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Certificate of Status Desired: No

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
Name SORREL, LAWRENCE B
Address 485 LEXINGTON AVE. 23RD FLOOR
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR
Name CALHOUN, JEFFREY M
Address 485 LEXINGTON AVE. 23RD FLOOR
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR
Name TOBACOWALA, AKHTAR E.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

Title SECRETARY
Name SHINTANI, CALVIN M.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

Title DIRECTOR
Name REED, DONALD B.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

Title DIRECTOR
Name SICA, FRANK V.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

Title DIRECTOR
Name HOCH, JAMES S.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

Title DIRECTOR
Name RANDO, JOHN J.
Address 1895 PRESTON WHITE DR.
SUITE 300
City-State-Zip: RESTON VA 20191

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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: CALVIN M. SHINTANI

SECRETARY

04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name MONTGOMERY, JOSHUA A.
Address 1895 PRESTON WHITE DR.
 SUITE 300
City-State-Zip: RESTON VA 20191

Title DIRECTOR
Name MALONE, PETER
Address 1895 PRESTON WHITE DR.
 SUITE 300
City-State-Zip: RESTON VA 20191

Title PRESIDENT, DIRECTOR
Name FUERST, RANDALL C.
Address 1895 PRESTON WHITE DR.
 SUITE 300
City-State-Zip: RESTON VA 20191