

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

FILED

**May 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # F97000004057 (2)
1. Corporation Name
OCLI, INCORPORATED



Principal Place of Business 1235 JEFFERSON DAVIS HWY., STE. 500 ARLINGTON VA 22202	Mailing Address 1235 JEFFERSON DAVIS HWY., STE. 500 ARLINGTON VA 22202
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5440 Cherokee Avenue Suite, Apt. #, etc. 22 City & State 23 Alexandria VA Zip Country 24 22312 25 USA	2a. Mailing Address 26 5440 Cherokee Avenue Suite, Apt. #, etc. 27 City & State 28 Alexandria VA Zip Country 29 22312 30 USA
--	---

3. Date Incorporated or Qualified 08/04/1997	4. FEI Number 54-1833439	Applied For 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 type="checkbox"/> No		

9. Name and Address of Current Registered Agent EVANS, GEORGE M P.A. 2100 PONCE DE LEON BLVD., STE. 1040 CORAL GABLES FL 23134	10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City B5 Zip Code
--	--

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 _____ (NO!) Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE C	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PLUNKETT, CHARLEY L		1.2 NAME	
STREET ADDRESS 1235 JEFFERSON DAVIS HWY., STE. 500		1.3 STREET ADDRESS	
CITY-ST-ZIP ARLINGTON VA 22202		1.4 CITY-ST-ZIP	
TITLE C	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCGURK, FRANK W		2.2 NAME	
STREET ADDRESS 1235 JEFFERSON DAVIS HWY., STE. 500		2.3 STREET ADDRESS	
CITY-ST-ZIP ARLINGTON VA 22202		2.4 CITY-ST-ZIP	
TITLE DP	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREEN, KEN		3.2 NAME	
STREET ADDRESS 3300 CORPORATE AVE., STE. 104		3.3 STREET ADDRESS	
CITY-ST-ZIP WESTON FL 33301		3.4 CITY-ST-ZIP Weston FL 33331	
TITLE DT	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCCORMACK, DON		4.2 NAME	
STREET ADDRESS 5440 CHEROKEE AVE.		4.3 STREET ADDRESS	
CITY-ST-ZIP ALEXANDRIA VA 22312		4.4 CITY-ST-ZIP	
TITLE V	<input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREEN, JASON		5.2 NAME	
STREET ADDRESS 3300 CORPORATE AVE., STE. 104		5.3 STREET ADDRESS	
CITY-ST-ZIP WESTON FL 33301		5.4 CITY-ST-ZIP Weston FL 33331	
TITLE S	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TUMLIN, GRADY H		6.2 NAME	
STREET ADDRESS 1235 JEFFERSON DAVIS HWY., STE. 500		6.3 STREET ADDRESS	
CITY-ST-ZIP ARLINGTON VA 22202		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.

CR2E034 (10/97)