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|--|---|--|-------|------------|--------|-----|
| <b>SCC eFile</b>   | <b>2016 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 216505197  |       |            |        |     |
| 1.) CORPORATION NAME:<br><b>EARTHSHAKERS, INC.</b>   |   | DUE DATE: <b>3/31/2016</b>   |       |            |        |     |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>TERRY E SHIVER<br/>7667 CYPRESS DR<br/>LANEXA, VA</b>   |   | SCC ID NO: <b>02832848</b>   |       |            |        |     |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>JAMES CITY COUNTY</b>  |   | 5.) STOCK INFORMATION<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>500</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 500 |
| CLASS  | AUTHORIZED  |  |       |            |        |     |
| COMMON   | 500   |  |       |            |        |     |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>  |   |  |       |            |        |     |
| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: PO BOX 262<br><br>CITY/ST/ZIP: TOANO, VA 23168   |   |  |       |            |        |     |
| 7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.  |   |  |       |            |        |     |
| NAME: TERRY E SHIVER<br>TITLE: PRESIDENT<br>ADDRESS: P O BOX 262<br>CITY/ST/ZIP/CO: TOANO, VA 23168  | <input checked="" type="checkbox"/> OFFICER   | <input checked="" type="checkbox"/> DIRECTOR   |       |            |        |     |
| NAME: JACK A SHIVER<br>TITLE: VICE PRESIDENT<br>ADDRESS: 3103 N RIVERSIDE DR<br>CITY/ST/ZIP/CO: LANEXA, VA 23089   | <input checked="" type="checkbox"/> OFFICER   | <input checked="" type="checkbox"/> DIRECTOR   |       |            |        |     |
| NAME: TINA R SHIVER<br>TITLE: SEC/TREAS<br>ADDRESS: 8707 ELM ROAD<br>CITY/ST/ZIP/CO: RICHMOND, VA 23235  | <input checked="" type="checkbox"/> OFFICER   | <input checked="" type="checkbox"/> DIRECTOR   |       |            |        |     |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.  |   |  |       |            |        |     |
| /s/ TERRY E SHIVER   | TERRY E SHIVER, PRESIDENT   | 2/10/2016  |       |            |        |     |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  | PRINTED NAME AND CORPORATE TITLE  | DATE   |       |            |        |     |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. |   |  |       |            |        |     |