

1.) CORPORATION NAME: CAYERE & CAYERE CPAs PC 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ZELNICK & ERICKSON, P.C. 12610 LAKE RIDGE DR WOODBIDGE, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: PRINCE WILLIAM COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 1/31/2014 SCC ID NO: 03336104 5.) STOCK INFORMATION <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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 3441 COMMISSION COURT STE 101 CITY/ST/ZIP: LAKE RIDGE, VA 22192

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: JACQUES CAYERE SR TITLE: PRESIDENT ADDRESS: 3441 COMMISSION CT STE 101 CITY/ST/ZIP/CO: LAKE RIDGE, VA 22192	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: JACQUES CAYERE JR TITLE: VICE PRESIDENT ADDRESS: 3441 COMMISSION CT, STE 101 CITY/ST/ZIP/CO: LAKE RIDGE, VA 22192	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ JACQUES CAYERE JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JACQUES CAYERE JR, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	11/15/2013 DATE
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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.