

1.) CORPORATION NAME:

**ABBTECH Professional Resources, Inc.**

DUE DATE: **2/29/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**THREASE A BAKER  
39789 ROCKY LANE  
LOVETTSVILLE, VA**

SCC ID NO: **04600524**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LOUDOUN COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 45625 WILLOW POND PLAZA

CITY/ST/ZIP: STERLING, VA 20164

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.

<p>NAME: THREASE A BAKER TITLE: PRESIDENT ADDRESS: 39789 ROCKY LANE CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: LAWRENCE M BRADY TITLE: VICE PRESIDENT ADDRESS: 13600 HERTIAGE FARMS CITY/ST/ZIP/CO: GAINESVILLE, VA 20155</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ROBERT WAYNE BAKER TITLE: TREASURER ADDRESS: 11424 FAIRFAX DRIVE CITY/ST/ZIP/CO: GREAT FALLS, VA 22066</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: STEVEN CHRISTOPHER BAKER TITLE: SECRETARY ADDRESS: 11424 FAIRFAX DRIVE CITY/ST/ZIP/CO: GREAT FALLS, VA 22066</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: KATHLEEN C BAKER TITLE: CEO/CHMN ADDRESS: 11424 FAIRFAX DRIVE CITY/ST/ZIP/CO: GREAT FALLS, VA 22066</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN BRADFORD BAKER TITLE: DIRECTOR ADDRESS: 39789 ROCKY LANE CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	WILLIAM G BAKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	21487 DOWNING CT		
CITY/ST/ZIP/CO:	ASHBURN, VA 20147		

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/ THREASE A BAKER	THREASE A BAKER, PRESIDENT	1/4/2016
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.