

1.) CORPORATION NAME:

WISETEK PROVIDERS, INC.

DUE DATE: **2/29/2012**

SCC ID NO: **04797130**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
KUMARAPPAN NACHIAPPAN
2531 SANDBURG ST
DUNN LORING, VA 22027-1302**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11211 WAPLES MILL ROAD
STE 220

CITY/ST/ZIP: FAIRFAX, VA 22030-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KUMARAPPAN NACHIAPPAN	
TITLE:	PRESIDENT	
ADDRESS:	2531 SANDBURG STREET	
CITY/ST/ZIP/CO:	DUNN LORING, VA 22027-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	UMA KUMARAPPAN	
TITLE:	OFFICER	
ADDRESS:	2531 SANDBURG STREET	
CITY/ST/ZIP/CO:	DUNN LORING, VA 22027-	

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.

<u>/s/ KUMARAPPAN NACHIAPPAN</u>	<u>KUMARAPPAN NACHIAPPAN,</u>	<u>1/30/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.