

1.) CORPORATION NAME: ESONGS, Inc.	DUE DATE: 1/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MICHAEL J SGARLAT 801 N PITT ST STE 109 ALEXANDRIA, VA 22314	SCC ID NO: 05327564				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALEXANDRIA CITY	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>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 724

CITY/ST/ZIP: WILKES - BARRE, PA 18701

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: JOHN PATRICK SGARLAT TITLE: PRESIDENT ADDRESS: PO BOX 724 CITY/ST/ZIP/CO: WILKES - BARRE, PA 18701	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: MEGAN SGARLAT TITLE: TREASURER ADDRESS: 169 WESTPOINT AVE CITY/ST/ZIP/CO: HARVEY'S LARE, PA 18618	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: CAITLIN SGARLAT TITLE: PRESIDENT ADDRESS: 7676 Brown Gulf Rd CITY/ST/ZIP/CO: Jamesville, NY 13078	<input checked="" type="checkbox"/>	OFFICER	<input 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/ JOHN PATRICK SGARLAT	JOHN PATRICK SGARLAT, PRESIDENT	1/31/2013
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.