

1.) CORPORATION NAME:

**Health Service International, Inc.**

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

SCC ID NO: **05338389**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
STEPHEN F PERRY  
3522 BOULEVARD STE A  
COLONIAL HEIGHTS, VA 23834**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**COLONIAL HEIGHTS CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3522 BOULEVARD SUITE A

CITY/ST/ZIP: COLONIAL HEIGHTS, VA 23834-

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: HERVEY GIMBEL  
TITLE: PRESIDENT  
ADDRESS: 911 LANDING WAY  
CITY/ST/ZIP/CO: CENTRALIA, WA 98531-

OFFICER

DIRECTOR

NAME: ALAN RICE  
TITLE: VICE PRESIDENT  
ADDRESS: PO BOX 436  
CITY/ST/ZIP/CO: ST. HELENA, CA 94574-

OFFICER

DIRECTOR

NAME: STEPHEN F PERRY  
TITLE: TREASURER  
ADDRESS: 3522 BLVD STE A  
CITY/ST/ZIP/CO: COLONIAL HEIGHTS, VA 23834-

OFFICER

DIRECTOR

NAME: ROBERT BURGESS  
TITLE: CFO  
ADDRESS: 303 CHABLIS SOUTH  
CITY/ST/ZIP/CO: CALISTOGA, CA 94515-

OFFICER

DIRECTOR

NAME: ANN GIMBEL  
TITLE: SECRETARY  
ADDRESS: 911 LANDING WAY  
CITY/ST/ZIP/CO: CENTRALIA, WA 98531-

OFFICER

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.

<u>/s/ STEPHEN F PERRY</u>	<u>STEPHEN F PERRY, TREASURER</u>	<u>2/6/2012</u>
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.		