

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215516845
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1.) CORPORATION NAME: COLUMBIA DENTAL CLINIC, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ANWAR SALHA 1530 N KEY BLVD APT 1003 ARLINGTON, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ARLINGTON COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 6/30/2015 SCC ID NO: 05418744 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>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1530 N KEY BLVD APT 1003

CITY/ST/ZIP: ARLINGTON, VA 22209

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: ANWAR SALHA TITLE: PRESIDENT ADDRESS: 1530 N KEY BLVD CITY/ST/ZIP/CO: ARLINGTON, VA 22209	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: RAMZI SALHA TITLE: DIRECTOR ADDRESS: 217 -218 PT SW CITY/ST/ZIP/CO: BOTHEL, WA 08021	<input 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/ ANWAR SALHA	ANWAR SALHA, PRESIDENT	4/29/2015
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.