

1.) CORPORATION NAME: Peter M. Smith, Inc.	DUE DATE: 11/30/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: PETER M SMITH 5918 JANE WAY ALEXANDRIA, VA	SCC ID NO: 05672738				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	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>COMV</td> <td>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMV	5,000
CLASS	AUTHORIZED				
COMV	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5918 JANE WAY

CITY/ST/ZIP: ALEXANDRIA, VA 22310

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: PETER M SMITH		
TITLE: PRES/TREAS/SEC		
ADDRESS: 5918 JANE WAY		
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22310		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ELIZABETH J. SMITH		
TITLE: VICE PRESIDENT		
ADDRESS: 5918 JANE WAY		
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22310		

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/ PETER M SMITH	PETER M SMITH, PRES/TREAS/SEC	9/17/2013
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.