

1.) CORPORATION NAME:

El Campesino, Inc.

DUE DATE: **10/31/2010**

SCC ID NO: **06048938**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

WALTER E RIVERS

410 POWELL AVE E

BIG STONE GAP, VA 24219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

WISE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 791 REGIONAL PARK ROAD

CITY/ST/ZIP: LEBANON, VA 24266-

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 type="checkbox"/> DIRECTOR
NAME:	SALVADOR ONATE		
TITLE:	OFFICER		
ADDRESS:	154 RIDGEVIEW CENTER		
CITY/ST/ZIP/CO:	WISE, VA 24293-		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SALVADOR ONATE		
TITLE:	OFFICER		
ADDRESS:	154 RIDGEVIEW CENTER #6		
CITY/ST/ZIP/CO:	WISE, VA 24293-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOSE ONATE		
TITLE:	DIRECTOR		
ADDRESS:	154 RIDGEVIEW CENTER #6		
CITY/ST/ZIP/CO:	WISE, VA 29293-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOSE ONATE		
TITLE:	DIRECTOR		
ADDRESS:	154 RIDGEVIEW CENTER #6		
CITY/ST/ZIP/CO:	WISE, VA 24293-		

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/ SALVADOR ONATE</u>	<u>SALVADOR ONATE, OFFICER</u>	<u>4/15/2011</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.