

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212527934

1.) CORPORATION NAME:

A.I.M. AUTO INSURANCE MART, INC.

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DENIECE M GRUSE
3534 CARLIN SPRINGS RD #3
FALLS CHURCH, VA 22041**

SCC ID NO: **06198881**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3534 CARLIN SPRINGS RD
STE 3

CITY/ST/ZIP: FALLS CHURCH, VA 22041

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:	DENIECE GRUSE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	O/D		
ADDRESS:	6191 MANCHESTER PARK CIR		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22310		

NAME:	GLORIA SIMON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	7927 YARKEY DRIVE		
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22042		

NAME:	Jeffrey A Gruse	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3509 Ellery Circle		
CITY/ST/ZIP/CO:	Falls Church, VA 22041		

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/ DENIECE GRUSE	DENIECE GRUSE, O/D	7/24/2012
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.