

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214504055

1.) CORPORATION NAME:

**DEXISIVE, INC.**

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PETRINA B MURPHY  
1801 ROBERT FULTON DR  
SUITE 120**

SCC ID NO: **06347553**

**RESTON, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	3,600

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1801 ROBERT FULTON DRIVE  
STE 120

CITY/ST/ZIP: RESTON, VA 20191

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:	PETRINA B MURPHY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIR		
ADDRESS:	1801 ROBERT FULTON DRIVE		
CITY/ST/ZIP/CO:	STE 120 RESTON, VA 20191		

NAME:	SOE OO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRINCIPAL OFFR		
ADDRESS:	1801 ROBERT FULTON DR		
CITY/ST/ZIP/CO:	STE 120 RESTON, VA 20191		

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/ PETRINA B MURPHY	PETRINA B MURPHY, PRES/DIR	1/16/2014
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.