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| <b>SCC eFile</b> | <b>2014 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 214514885 |
|------------------|---|-----------|

|   |   |       |            |      |       |
|---|---|-------|------------|------|-------|
| 1.) CORPORATION NAME:<br><b>Elzly Technology Corporation</b>  | DUE DATE: <b>5/31/2014</b>  |       |            |      |       |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>JAMES A ELLOR<br/>10701 MEADOWOOD DRIVE<br/>VIENNA, VA</b> | SCC ID NO: <b>06377691</b>  |       |            |      |       |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>FAIRFAX COUNTY</b>  | 5.) STOCK INFORMATION<br><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>COMA</td> <td>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMA | 1,000 |
| CLASS   | AUTHORIZED  |       |            |      |       |
| COMA  | 1,000   |       |            |      |       |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>   |   |       |            |      |       |

6.) PRINCIPAL OFFICE ADDRESS:  
  
ADDRESS: 1610 WASHINGTON PLAZA N.  
CITY/ST/ZIP: RESTON, VA 20190

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: JAMES P AULT                   |   |  |
| TITLE: PRESIDENT                     |   |  |
| ADDRESS: 110 BARTRAM LANE            |   |  |
| CITY/ST/ZIP/CO: OCEAN CITY, NJ 08226 |   |  |

|                                  |   |  |
|----------------------------------|---|--|
|                                  | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JAMES A ELLOR              |   |  |
| TITLE: TREASURER                 |   |  |
| ADDRESS: 10710 MEADOWOOD DRIVE   |   |  |
| CITY/ST/ZIP/CO: VIENNA, VA 22181 |   |  |

|                                  |   |  |
|----------------------------------|---|--|
|                                  | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: DIANE W ELLOR              |   |  |
| TITLE: SECRETARY                 |   |  |
| ADDRESS: 10701 MEADOWOOD DRIVE   |   |  |
| CITY/ST/ZIP/CO: VIENNA, VA 22181 |   |  |

|                                     |                                  |  |
|-------------------------------------|----------------------------------|--|
|                                     | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JOHN REPP                     |                                  |  |
| TITLE: DIRECTOR                     |                                  |  |
| ADDRESS: 2204 BALSAM LANE           |                                  |  |
| CITY/ST/ZIP/CO: MILLVILLE, NJ 08322 |                                  |  |

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/ DIANE W ELLOR                                   | DIANE W ELLOR, SECRETARY         | 3/21/2014 |
| 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.