

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215506709

1.) CORPORATION NAME:

KASHIF INC.

DUE DATE: **1/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CHOUDARY I CHATHA
5000 WILSON BLVD
ARLINGTON, VA**

SCC ID NO: **06712657**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	25,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5000 WILSON BLVD

CITY/ST/ZIP: ARLINGTON, VA 22203

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:	CHOUDARY I CHATHA		
TITLE:	PRESIDENT		
ADDRESS:	5000 WILSON BOULEVARD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22203		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHAUDRY M BASHARAT		
TITLE:	DIRECTOR		
ADDRESS:	5000 WILSON BOULEVARD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22203		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TAIMOOR CHATHA		
TITLE:	DIRECTOR		
ADDRESS:	909 N MCKINLEY RD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22205		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MOHAMMED SARFRAZ WARRIACH		
TITLE:	DIRECTOR		
ADDRESS:	6414 KING LOUIS DR		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22312		

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/ CHOUDARY I CHATHA	CHOUDARY I CHATHA,	2/23/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.