

1.) CORPORATION NAME: <b>AIC OF MANASSAS, INC.</b>	DUE DATE: <b>3/31/2012</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>MICHAEL CHARAPP          8180 GREENSBORO DR STE 1000          MCLEAN, VA 22102</b>	SCC ID NO: <b>06745574</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>PRINCE WILLIAM COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9100 CENTREVILLE RD

CITY/ST/ZIP: MANASSAS, VA 20110

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: NOM I E D BATES TITLE: PRESIDENT ADDRESS: 9100 CENTREVILLE RD CITY/ST/ZIP/CO: MANASSAS, VA 20110		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Corey Bates TITLE: VICE PRESIDENT ADDRESS: 9100 CENTREVILLE RD CITY/ST/ZIP/CO: MANASSAS, VA 20110		

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/		5/30/2012
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.