

1.) CORPORATION NAME:

**BEACH WORKS INCORPORATED**

DUE DATE: **8/31/2011**

SCC ID NO: **06816599**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
NERISSA MUIR  
4089A PORTSMOUTH BLVD.  
PORTSMOUTH, VA 23701**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**PORTSMOUTH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4089 PORTSMOUTH BLVD  
SUITE A

CITY/ST/ZIP: PORTSMOUTH, VA 23701-

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 type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	NERISSA MUIR			
TITLE:	DIRECTOR			
ADDRESS:	323 YARMOUTH STREET			
CITY/ST/ZIP/CO:	NORFOLK, VA 23510-			

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JASON MUIR			
TITLE:	DIRECTOR			
ADDRESS:	327 YARMOUTH STREET			
CITY/ST/ZIP/CO:	NORFOLK, VA 23510-			

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JASON MUIR			
TITLE:	PRESIDENT			
ADDRESS:	323 YARMOUTH STREET			
CITY/ST/ZIP/CO:	NORFOLK, VA 23510-			

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/ JASON MUIR	JASON MUIR, DIRECTOR	9/21/2011
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.