

1.) CORPORATION NAME: Acha Veterinary Relief Services, Inc.	DUE DATE: 3/31/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MARTA E ACHA 35148 SNICKERSVILLE TNPK ROUND HILL, VA	SCC ID NO: 06915466
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 35148 SNICKERSVILLE TPKE CITY/ST/ZIP: ROUND HILL, VA 20141	
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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: MARTA E. ACHA D.V.M	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 35148 SNICKERSVILLE TPKE				
CITY/ST/ZIP/CO: ROUND HILL, VA 20141				

NAME: LISA TORRES	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 35148 SNICKERSVILLE TPKE				
CITY/ST/ZIP/CO: ROUND HILL, VA 20141				

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/ MARTA E. ACHA D.V.M	MARTA E. ACHA D.V.M, PRESIDENT	3/30/2013
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.