

| | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------|--------|-------|
| 1.) CORPORATION NAME: PHAROS GROUP, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TIMOTHY J. CIAMPAGLIO 6 BULLRUSH CT STAFFORD, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: STAFFORD COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA | DUE DATE: 5/31/2016 SCC ID NO: 06947873 5.) STOCK INFORMATION <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>COMMON</td> <td>5,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 5,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 5,000 | | | | |

| |
|---------------------------------------------------------------------------------------------------|
| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 6 BULLRUSH COURT CITY/ST/ZIP: STAFFORD, VA 22554 |
|---------------------------------------------------------------------------------------------------|

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: TIMOTHY J CIAMPAGLIO TITLE: PRES/DIR ADDRESS: 6 BULLRUSH COURT CITY/ST/ZIP/CO: STAFFORD, VA 22554 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------|-------------------------------------|----------|

| | | | | |
|--------------------------------------------------------------------------------------------------------------|-------------------------------------|---------|--------------------------|----------|
| NAME: RUSSELL J SMITH TITLE: SECRETARY ADDRESS: 45 TEDDINGTON WAY CITY/ST/ZIP/CO: LACONIA, NH 03246 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|--------------------------------------------------------------------------------------------------------------|-------------------------------------|---------|--------------------------|----------|

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/ TIMOTHY J CIAMPAGLIO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | TIMOTHY J CIAMPAGLIO, PRES/DIR PRINTED NAME AND CORPORATE TITLE | 3/22/2016 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.