

1.) CORPORATION NAME: TECHNIQUE DENTAL CERAMICS INC.	DUE DATE: 8/31/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: FARSHAD IRANDOUST 766A WALKER RD GREAT FALLS, VA 22066	SCC ID NO: 06985196				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	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>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED				
COMMON	100				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 11102 BEACH MILL ROAD CITY/ST/ZIP: GREAT FALLS, VA 22066	
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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: KULDEEP GAMBHIR TITLE: TREASURER ADDRESS: 5025 BACKLICK ROAD SUITE - A CITY/ST/ZIP/CO: ANNANDALE, VA 22003-6044	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: FARSHAD IRANDOUST TITLE: OFFICER ADDRESS: 11102 BEACH MILL ROAD CITY/ST/ZIP/CO: GREAT FALLS, VA 22066	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ KULDEEP GAMBHIR	KULDEEP GAMBHIR, TREASURER	8/22/2012
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.