

1.) CORPORATION NAME: <b>Catalyst Cubes Inc.</b>	DUE DATE: <b>9/30/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>NIRANJAN AENUGU 42879 BRAEMOUNT CIR ASHBURN, VA</b>	SCC ID NO: <b>07279755</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>LOUDOUN COUNTY</b>	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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 42879 BRAEMOUNT CIR  CITY/ST/ZIP: ASHBURN, VA 20148	
---	--

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: SRIVIDYA MACHERIA			
TITLE: PRESIDENT/DIR			
ADDRESS: 42879 BRAEMOUNT CIR			
CITY/ST/ZIP/CO: ASHBURN, VA 20148			

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: NIRANJAN REDDY AENUGU			
TITLE: VICE PRESIDENT			
ADDRESS: 42879 BRAEMOUNT CIR			
CITY/ST/ZIP/CO: ASHBURN, VA 20148			

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/ NIRANJAN REDDY AENUGU	NIRANJAN REDDY AENUGU, VICE PRESIDENT	10/18/2014
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.