

|   |   |       |            |        |     |
|---|---|-------|------------|--------|-----|
| 1.) CORPORATION NAME:<br><b>The Stillman Company Inc.</b>   | DUE DATE: <b>5/31/2016</b>  |       |            |        |     |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>HAROLD L NOVICK<br/>5613 TOWER HILL CIR<br/>ALEXANDRIA, VA</b> | SCC ID NO: <b>07371453</b>  |       |            |        |     |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>FAIRFAX COUNTY</b>  | 5.) STOCK INFORMATION<br><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>500</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 500 |
| CLASS   | AUTHORIZED  |       |            |        |     |
| COMMON  | 500   |       |            |        |     |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>   |   |       |            |        |     |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5613 TOWER HILL CIRCLE

CITY/ST/ZIP: ALEXANDRIA, VA 22315

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: HAROLD L. NOVICK               | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: P/S                           |   |                                   |
| ADDRESS: 6101 EDSALL RD. APT. 1405   |   |                                   |
| CITY/ST/ZIP/CO: ALEXANDRIA, VA 22304 |   |                                   |

|                                     |   |                                   |
|-------------------------------------|---|-----------------------------------|
| NAME: NASIR MASUD                   | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: TREASURER                    |   |                                   |
| ADDRESS: 5613 TOWER HILL CIRCLE     |   |                                   |
| CITY/ST/ZIP/CO: ALEXANRIA, VA 22315 |   |                                   |

|  |                                  |  |
|--|----------------------------------|--|
| NAME: SHIEKH MUHAMMAD AKHTAR           | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                        |                                  |  |
| ADDRESS: 143 EAST ST. NO 18 PHASE1 DHA |                                  |  |
| CITY/ST/ZIP/CO: , , FN                 |                                  |  |

|  |                                  |  |
|--|----------------------------------|--|
| NAME: SHEIKH MUHAMMAD SHAHID           | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                        |                                  |  |
| ADDRESS: 143 EAST ST NO 18 PHASE 1 DHA |                                  |  |
| CITY/ST/ZIP/CO: , , FN                 |                                  |  |

|  |                                  |  |
|--|----------------------------------|--|
| NAME: SHIEKH MUHAMMAD ZAHID            | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                        |                                  |  |
| ADDRESS: 143 EAST ST. NO.18 PHASE1 DHA |                                  |  |
| CITY/ST/ZIP/CO: , , FN                 |                                  |  |

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/ HAROLD L. NOVICK                                | HAROLD L. NOVICK, P/S            | 5/27/2016 |
| 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.