

1.) CORPORATION NAME: Sterile Services co.	DUE DATE: 5/31/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ALJAUN CARTER 14773 COURTLANDT HEIGHTS ROAD WOODBIDGE, VA	SCC ID NO: 07514748
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: PRINCE WILLIAM COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 14773 COURTLAND HEIGHTS ROAD CITY/ST/ZIP: WOODBRIDGE, VA 22193	
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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: ALJUAN CARTER TITLE: VICE PRESIDENT ADDRESS: 14773 COURTLANDT HEIGHTS ROAD CITY/ST/ZIP/CO: WOODBRIDGE, VA 22193	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: FANIA CARTER TITLE: PRESIDENT ADDRESS: 14773 COURTLANDT HEIGHTS ROAD CITY/ST/ZIP/CO: WOODBRIDGE, VA 22193	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: ALJAUN CARTER TITLE: DIRECTOR ADDRESS: 14773 COURTLANDT HEIGHTS ROAD CITY/ST/ZIP/CO: WOODBRIDGE, VA 22193	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: FRANKLIN PIERRE TITLE: DIRECTOR ADDRESS: 931 NW 141 STREET CITY/ST/ZIP/CO: MIAMI, FL 33168	<input type="checkbox"/>	OFFICER	<input checked="" 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/ FANIA CARTER	FANIA CARTER, PRESIDENT	5/15/2013
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.