

|                  |   |           |
|------------------|---|-----------|
| <b>SCC eFile</b> | <b>2014 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 214528454 |
|------------------|---|-----------|

|   |  |       |            |        |       |
|---|--|-------|------------|--------|-------|
| 1.) CORPORATION NAME:<br><b>JCAB INC.</b>   | DUE DATE: <b>6/30/2014</b>   |       |            |        |       |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CHARLES D. PITTMAN, JR. &amp; ASSOCIATES, P.C.<br/>712 HILLINGDON COURT<br/>VIRGINIA BEACH, VA</b> | SCC ID NO: <b>07528292</b>   |       |            |        |       |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>VIRGINIA BEACH CITY</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>5,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 5,000 |
| CLASS   | AUTHORIZED   |       |            |        |       |
| COMMON  | 5,000  |       |            |        |       |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>   |  |       |            |        |       |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 821 WATERFALL WAY

CITY/ST/ZIP: CHESAPEAKE, VA 23322

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: JEANINE M. CLINE               |   |  |
| TITLE: PRESIDENT                     |   |  |
| ADDRESS: 821 WATERFALL WAY           |   |  |
| CITY/ST/ZIP/CO: CHESAPEAKE, VA 23322 |   |  |

|                                   |   |                                   |
|-----------------------------------|---|-----------------------------------|
|                                   | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: Elizabeth Poston            |   |                                   |
| TITLE: VICE PRESIDENT             |   |                                   |
| ADDRESS: 2635 northcross road     |   |                                   |
| CITY/ST/ZIP/CO: roanoke, VA 24018 |   |                                   |

|                                      |   |                                   |
|--------------------------------------|---|-----------------------------------|
|                                      | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: Mary Wooddell                  |   |                                   |
| TITLE: SECRETARY                     |   |                                   |
| ADDRESS: 448 San Roman Drive         |   |                                   |
| CITY/ST/ZIP/CO: Chesapeake, VA 23322 |   |                                   |

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/ JEANINE M. CLINE                                | JEANINE M. CLINE, PRESIDENT      | 6/1/2014 |
| 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.