

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214500294				
1.) CORPORATION NAME: NuForms Inc.		DUE DATE: 1/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ROB GORDON 5765 BURKE CENTRE PARKWAY F # 164 BURKE, VA		SCC ID NO: 07595804 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					
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY						
4.) STATE OR COUNTRY OF INCORPORATION: VA						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 5765 BURKE CENTRE PARKWAY F # 164 CITY/ST/ZIP: BURKE, VA 22015						
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: ROBERT GORDON TITLE: PRESIDENT ADDRESS: 5765 BURKE CENTRE PARKWAY F # 164 CITY/ST/ZIP/CO: BURKE, VA 22015	<input checked="" 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.						
<u>/s/ ROBERT GORDON</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>ROBERT GORDON, PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>11/18/2013</u> 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.						