

<b>SCC eFile</b>	<b>2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	216510040
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1.) CORPORATION NAME: <b>Performance Animal Chiropractic PC</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>UNITED STATES CORPORATION AGENTS INC          1900 CAMPUS COMMONS DRIVE STE 100          RESTON, VA</b>	DUE DATE: <b>1/31/2016</b>  SCC ID NO: <b>07605660</b>  5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 3319 ISLE OF PINES DR.  CITY/ST/ZIP: MONETA, VA 24121
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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: JENNIFER BENSEN TITLE: PRESIDENT ADDRESS: 3319 ISLE OF PINES DR. CITY/ST/ZIP/CO: MONETA, VA 24121	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME: JENNIFER BENSEN TITLE: DIRECTOR ADDRESS: 3319 ISLE OF PINES DR CITY/ST/ZIP/CO: MONETA, VA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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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/ JENNIFER BENSEN	JENNIFER BENSEN, PRESIDENT	3/20/2016
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.