

1.) CORPORATION NAME: Sree Consulting Services Inc.	DUE DATE: 3/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SREEREKHA CHALLAPALLI 20423 BOWFONDS STREET ASHBURN, VA	SCC ID NO: 07628993				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY	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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 20423 BOWFONDS STREET CITY/ST/ZIP: ASHBURN, VA 20147	
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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: SREEREKHA CHALLAPALLI TITLE: DIRECTOR ADDRESS: 20423 BOWFONDS STREET CITY/ST/ZIP/CO: ASHBURN, VA 20147	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: sreerekha challapalli TITLE: PRESIDENT ADDRESS: 20423 bowfonds st CITY/ST/ZIP/CO: ashburn, VA 20147	<input checked="" type="checkbox"/> OFFICER <input 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/ SREEREKHA CHALLAPALLI SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SREEREKHA CHALLAPALLI, DIRECTOR PRINTED NAME AND CORPORATE TITLE	2/4/2014 DATE
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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.