

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215520171						
1.) CORPORATION NAME: <b>Thomas Solutions Incorporated</b>		DUE DATE: <b>4/30/2015</b>						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ALLAN THOMAS 6075 DEER RIDGE TR SPRINGFIELD, VA</b>		SCC ID NO: <b>07631930</b>						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX COUNTY</b>		5.) STOCK INFORMATION						
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMV</td> <td style="text-align: center;">12,500</td> </tr> <tr> <td>COMNV</td> <td style="text-align: center;">12,500</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMV	12,500	COMNV	12,500
CLASS	AUTHORIZED							
COMV	12,500							
COMNV	12,500							
6.) PRINCIPAL OFFICE ADDRESS:								
ADDRESS: 8796 POHICK CREEK VIEW								
CITY/ST/ZIP: SPRINGFIELD, VA 22153								
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: ALLAN R THOMAS TITLE: PRESIDENT ADDRESS: 8796 POHICK CREEK VIEW CITY/ST/ZIP/CO: SPRINGFIELD, VA 22153		<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.								
/s/ ALLAN R THOMAS	ALLAN R THOMAS, PRESIDENT	5/22/2015						
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.								