

| | | |
|------------------|---|-----------|
| SCC eFile | 2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 215548514 |
|------------------|---|-----------|

| | | | | | |
|---|--|-------|------------|--------|-------|
| 1.) CORPORATION NAME: METTERS INDUSTRIES, INC. | DUE DATE: 10/31/2015 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SAMUEL METTERS 8200 GREENSBORO DR., SUITE 500 MCLEAN, VA | SCC ID NO: F0480014 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY | 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>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 1,000 | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8200 GREENSBORO DR STE 500

CITY/ST/ZIP: MC LEAN, VA 22102

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: SAMUEL METTERS TITLE: CEO/CHMN ADDRESS: 1408 NORTH MEADE STREET CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: SANTO LATORES TITLE: COO ADDRESS: 338 BROADVIEW LANE CITY/ST/ZIP/CO: ANNAPOLIS, MD 21401 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: KIM METTERS TITLE: EVP-CORP AFF ADDRESS: 1276 N. WAYNE ST STE 1000 CITY/ST/ZIP/CO: ARLINGTON, VA 22201 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: PHAT THACH TITLE: EVP/CFO ADDRESS: 43686 FROST CT 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/ SAMUEL METTERS | SAMUEL METTERS, CEO/CHMN | 2/29/2016 |
| 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.