

1.) CORPORATION NAME:

**MINKOFF COMPANY, INC.**

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F1145053**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11716 BALTIMORE AVE

CITY/ST/ZIP: BELTSVILLE, MD 20705

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:	STEVEN GROSS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	11716 BALTIMORE AVENUE		
CITY/ST/ZIP/CO:	BELTSVILLE, MD 20705		

NAME:	RUSSELL C MINKOFF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	GENERAL PARTNER		
ADDRESS:	11716 BALTIMORE AVENUE		
CITY/ST/ZIP/CO:	BELTSVILLE, MD 20705		

NAME:	GREGORY MINKOFF	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	11716 BALTIMORE AVE		
CITY/ST/ZIP/CO:	BELTSVILLE, MD 20705		

NAME:	BARRY MINKDFF	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5223 RIVER RD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20876		

NAME:	Jay Cruz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8439 Oakton Lane 2E		
CITY/ST/ZIP/CO:	Ellicott City, MD 21043		

NAME:	Patricia Clifford	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11911 Hitching Post Lane		
CITY/ST/ZIP/CO:	Rockville, MD 20852		

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/ Patricia Clifford	Patricia Clifford, DIRECTOR	5/17/2012
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.		