

1.) CORPORATION NAME: Poor Enterprises Inc.	DUE DATE: 8/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GARNETT OSBORNE 2812 EXECUTIVE DRIVE CHESTER, VA	SCC ID NO: F1270034				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD 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: LA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 18884 BIENVILLE CT. CITY/ST/ZIP: PRAIRIEVILLE, LA 70769	
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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: STACY M POOR TITLE: PRESIDENT ADDRESS: 18884 BIENVILLE CT. CITY/ST/ZIP/CO: PRAIRIEVILLE, LA 70769	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: STACY M POOR TITLE: SECRETARY ADDRESS: 18884 BIENVILLE CT. CITY/ST/ZIP/CO: PRAIRIEVILLE, LA 70769	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: GARNETT OSBORNE TITLE: DIRECTOR ADDRESS: 2812 EXECUTIVE DRIVE CITY/ST/ZIP/CO: CHESTER, VA 23831	<input 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/ STACY M POOR	STACY M POOR, PRESIDENT	12/1/2014
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.