

1.) CORPORATION NAME:

P.F. Chang's China Bistro, Inc.

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1305822**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	40,000,000
PREFER	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7676 E PINNACLE PEAK ROAD

CITY/ST/ZIP: SCOTTSDALE, AZ 85255

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:	RICHARD FEDERICO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	7676 E PINNACLE PEAK ROAD		
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85255		

NAME:	MARK D. MUMFORD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	7676 E. PINNACLE PEAK ROAD		
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85255		

NAME:	Richard Federico	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7676 E. Pinnacle Peak Rd.		
CITY/ST/ZIP/CO:	Scottsdale, AZ 85255		

NAME:	Mark D. Mumford	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	7676 E. Pinnacle Peak Rd.		
CITY/ST/ZIP/CO:	Scottsdale, AZ 85255		

NAME:	R. Michael Welborn	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Executive VP		
ADDRESS:	7676 E. Pinnacle Peak Rd.		
CITY/ST/ZIP/CO:	Scottsdale, AZ 85255		

NAME:	Jason Mazingo	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	375 Park Avenue		
CITY/ST/ZIP/CO:	12th Floor New York, NY 10152		

NAME: Jeffrey Long TITLE: DIRECTOR ADDRESS: 375 Park Avenue 12th Floor CITY/ST/ZIP/CO: New York, NY 10152	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Amar Doshi TITLE: DIRECTOR ADDRESS: 375 Park Avenue 12th Floor CITY/ST/ZIP/CO: New York, NY 10152	<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/ Mark D.Mumford	Mark D.Mumford,	7/17/2012
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.		