

1.) CORPORATION NAME:

TRANSATLANTIC WEB SERVICES INC.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1608233**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 22000 AOL WAY

CITY/ST/ZIP: DULLES, VA 20166

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:	Curtis Brown	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	770 Broadway, 4th Floor		
CITY/ST/ZIP/CO:	New York, NY 10003		
NAME:	JULIE JACOBS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/S		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		
NAME:	WILLIAM MCGRATH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		
NAME:	ARTHUR MINSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASST TREAS		
ADDRESS:	770 BROADWAY 4TH FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10003		
NAME:	MICHAEL HOWSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		
NAME:	J. MICHAEL SUFFREDINI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		

NAME: MICHAEL E. NOLAN, JR. TITLE: DIRECTOR ADDRESS: 770 BROADWAY, 4TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10003	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jim Freely TITLE: VICE PRESIDENT ADDRESS: 22000 AOL Way CITY/ST/ZIP/CO: Dulles, VA 20166	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Michael Manos TITLE: VICE PRESIDENT ADDRESS: 22000 AOL Way CITY/ST/ZIP/CO: Dulles, VA 20166	<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/ MICHAEL HOWSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL HOWSON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	10/4/2012 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.		