

1.) CORPORATION NAME: <b>CAROLINA CARPORTS, INC.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>NATIONAL REGISTERED AGENTS INC          4701 COX ROAD          SUITE 301            GLEN ALLEN, VA 23060-6802</b>	DUE DATE: <b>7/31/2012</b> SCC ID NO: <b>F1634973</b> 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>500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	500
CLASS	AUTHORIZED				
COMMON	500				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>NC</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 187 CARDINAL RIDGE TRAIL  
 CITY/ST/ZIP: DOBSON, NC 27017

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: JAVIER HERRERA TITLE: PRESIDENT ADDRESS: 187 CARDINAL RIDGE TRAIL CITY/ST/ZIP/CO: DOBSON, NC 27017	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
-------------------------------------------------------------------------------------------------------------------	---------------------------------------------	----------------------------------------------	--

NAME: ADELA HERRERA TITLE: VICE PRESIDENT ADDRESS: 187 CARDINAL RIDGE TRAIL CITY/ST/ZIP/CO: DOBSON, NC 27017	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
-----------------------------------------------------------------------------------------------------------------------	---------------------------------------------	----------------------------------------------	--

NAME: CAROLINA H OCHOA TITLE: TREASURER ADDRESS: 187 CARDINAL RIDGE TR CITY/ST/ZIP/CO: DOBSON, NC 27017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
------------------------------------------------------------------------------------------------------------------	---------------------------------------------	-----------------------------------	--

NAME: MONICA V HERRERA TITLE: SECRETARY ADDRESS: 187 CARDINAL RIDGE TR CITY/ST/ZIP/CO: DOBSON, NC 27017	<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/ ADELA HERRERA	ADELA HERRERA, VICE PRESIDENT	1/16/2013
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.