

1.) CORPORATION NAME: <b>ANDREINI &amp; COMPANY</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX ROAD, SUITE 285          GLEN ALLEN, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>CA</b>	DUE DATE: <b>9/30/2015</b> SCC ID NO: <b>F1641853</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>2,000,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	2,000,000
CLASS	AUTHORIZED				
COMMON	2,000,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 220 W 20TH AVE

CITY/ST/ZIP: SAN MATEO, CA 94403

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: GIOVANNI A ANDREINI TITLE: PRESIDENT ADDRESS: 220 W 20TH AVE CITY/ST/ZIP/CO: SAN MATEO, CA 94403	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: DANIEL L CENTONI TITLE: VICE PRESIDENT ADDRESS: 220 W 20TH AVE CITY/ST/ZIP/CO: SAN MATEO, CA 94403	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: HENRY CHEN TITLE: CFO/TREAS ADDRESS: 220 W 20TH AVE CITY/ST/ZIP/CO: SAN MATEO, CA 94403	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
--	-------------------------------------	---------	-------------------------------------	----------

NAME: MICHAEL J COLZANI TITLE: SECRETARY ADDRESS: 220 W 20TH AVE CITY/ST/ZIP/CO: SAN MATEO, CA 94403	<input checked="" 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/ MICHAEL J COLZANI SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL J COLZANI, SECRETARY PRINTED NAME AND CORPORATE TITLE	9/1/2015 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.