

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214528777
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1.) CORPORATION NAME: Analytical Services Incorporated	DUE DATE: 2/28/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MICHAEL A SLIVINSKI 402 N WEST ST CULPEPER, VA	SCC ID NO: F1658592				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX 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>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				
4.) STATE OR COUNTRY OF INCORPORATION: MD					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 402 N WEST ST CITY/ST/ZIP: CULPEPER, VA 22701	
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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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: MICHAEL A SLIVINSKI			
TITLE: PRESIDENT			
ADDRESS: 402 N WEST ST			
CITY/ST/ZIP/CO: CULPEPER, VA 22701			

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: RALPH ABBONDANZA			
TITLE: SECRETARY			
ADDRESS: 402 N WEST ST			
CITY/ST/ZIP/CO: CULPEPER, VA 22701			

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 A SLIVINSKI	MICHAEL A SLIVINSKI, PRESIDENT	6/3/2014
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.