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| <b>SCC eFile</b> | <b>2016 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 216508663 |
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|  |   |       |            |        |       |
|--|---|-------|------------|--------|-------|
| 1.) CORPORATION NAME:<br><b>American International Contractors (SpecialProjects), Inc.</b><br>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>FRANCOIS ANTYPAS<br/>         4600 N FAIRFAX DR STE 1004<br/>         ARLINGTON, VA</b> | DUE DATE: <b>4/30/2016</b><br><br>SCC ID NO: <b>F1663949</b><br><br>5.) STOCK INFORMATION<br><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>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS  | AUTHORIZED  |       |            |        |       |
| COMMON   | 1,000   |       |            |        |       |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>ARLINGTON COUNTY</b>   |   |       |            |        |       |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>DE</b>  |   |       |            |        |       |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4600 N FAIRFAX DR STE 602

CITY/ST/ZIP: ARLINGTON, VA 22203

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: JOSEPH SCHWEITZER<br>TITLE: PRES/DIR<br>ADDRESS: 4600 N FAIRFAX DR<br>STE 602<br>CITY/ST/ZIP/CO: ARLINGTON, VA 22203 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|   |   |                                   |  |
|---|---|-----------------------------------|--|
| NAME: CHRISTIAN JACOBS<br>TITLE: TREASURER<br>ADDRESS: 4600 N FAIRFAX DR STE.602<br>CITY/ST/ZIP/CO: ARLINGTON, VA 22203 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
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|   |                                  |  |  |
|---|----------------------------------|--|--|
| NAME: AMBASSADOR DELL DAILEY<br>TITLE: DIRECTOR<br>ADDRESS: 4600 N FAIRFAX DR<br>STE 602<br>CITY/ST/ZIP/CO: ARLINGTON, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|   |                                  |  |  |
|---|----------------------------------|--|--|
| NAME: DANIEL GREY<br>TITLE: DIRECTOR<br>ADDRESS: 4600 N. FAIRFAX DR, STE 602<br>CITY/ST/ZIP/CO: ARLINGTON, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|   |                                  |  |  |
|---|----------------------------------|--|--|
| NAME: THEODORA HANCOCK<br>TITLE: DIRECTOR<br>ADDRESS: 4600 N FAIRFAX DR<br>STE 602<br>CITY/ST/ZIP/CO: ARLINGTON, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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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/ _____<br>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | _____<br>PRINTED NAME AND CORPORATE TITLE | _____<br>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.