

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215502643
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1.) CORPORATION NAME: <b>DISASTER RENTALS, INC.</b>	DUE DATE: <b>2/28/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>NATIONAL REGISTERED AGENTS INC 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</b>	SCC ID NO: <b>F1696923</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: <b>MD</b>	<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				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9710 TRAVILLE GATEWAY DRIVE 115  
Attn: Amanda Bergman

CITY/ST/ZIP: ROCKVILLE, MD 20850

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: MARK E FUTROVSKY	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 5706 FREDERICK AVE				
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852				

NAME: VINCE CATANIA	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: TREASURER				
ADDRESS: 5706 FREDERICK AVE				
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852				

NAME: RONALD BERGMAN	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: CHAIRMAN				
ADDRESS: 5706 FREDERICK AVE				
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852				

NAME: SAMUEL J BERGMAN	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: CEO				
ADDRESS: 5706 FREDERICK AVE				
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852				

NAME: RON KRONTHAL	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 5706 FREDERICK AVE				
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852				

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/ SAMUEL J BERGMAN	SAMUEL J BERGMAN, CEO	1/16/2015
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.