

1.) CORPORATION NAME:

DUE DATE: **3/31/2013**

**International Institute for Sustainable Laboratories**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1702382**

**PHILIP J WIRDZEK  
4311 PLANTERS CT  
ANNANDALE, VA 22003**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4311 PLANTERS CT

CITY/ST/ZIP: ANNANDALE, VA 22003

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:	PHILIP J. WIRDZEK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRES/EXEC DIR		
ADDRESS:	4311 PLANTERS COURT		
CITY/ST/ZIP/CO:	ANNANDALE, VA 22003		
NAME:	GORDON P SHARP	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	39 CHAPEL ST		
CITY/ST/ZIP/CO:	NEWTON, MA 02458		
NAME:	BETH SHEARER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY/TREAS		
ADDRESS:	1200 N NASH STREET #225		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209		
NAME:	FRANCO ATASSI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SIEMENS INDUSTRY INC., BTD		
CITY/ST/ZIP/CO:	BUFFALO GROVE, IL 60089		
NAME:	WENDELL BRASE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	UNIVERSITY OF CALIFORNIA, IRVINE		
CITY/ST/ZIP/CO:	MS-1025, 559 ALDRICH HALL IRVINE, CA 92697-1025		
NAME:	DANIEL DOYLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	GRUMMAN/BUTKUS ASSOCIATES		
CITY/ST/ZIP/CO:	820 DAVIS ST., SUITE 300 EVANSTON, IL 60201-4446		

NAME: PUNIT JAIN TITLE: DIRECTOR ADDRESS: CANNON DESIGN 1100 CLARK AVE CITY/ST/ZIP/CO: ST. LOUIS, MO 63102	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: TIMOTHY KEHRLI TITLE: DIRECTOR ADDRESS: LUTRON ELECTRONICS, INC. 7200 SUTER ROAD CITY/ST/ZIP/CO: COOPERSBURG, PA 18036-1299	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JAMES PLOURDE TITLE: DIRECTOR ADDRESS: SCHNEIDER ELECTRIC INC. 295 TECH PARK DR., SUITE 100 CITY/ST/ZIP/CO: LAVERGNE, TN 37086	<input 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.		
<u>/s/ PHILIP J. WIRDZEK</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>PHILIP J. WIRDZEK, PRES/EXEC DIR</u> PRINTED NAME AND CORPORATE TITLE	<u>1/14/2013</u> 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.		