

1.) CORPORATION NAME:

Standard Solar, Inc.

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 E MAIN ST**

SCC ID NO: **F1704560**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	7,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1355 PICCARD DRIVE
STE 300

CITY/ST/ZIP: ROCKVILLE, MD 20850-4315

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:	SCOTT WIATER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1355 PICCARD DRIVE		
	STE 300		
CITY/ST/ZIP/CO:	ROCKVILLE, MD 20850-4315		

NAME:	ANTHONY CLIFFORD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	1355 PICCARD DRIVE		
	STE 300		
CITY/ST/ZIP/CO:	ROCKVILLE, MD 20850-4315		

NAME:	STEVEN LAMB	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1355 PICCARD DRIVE		
	STE 300		
CITY/ST/ZIP/CO:	ROCKVILLE, MD 20850-4315		

NAME:	MARK OHRSTROM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1355 PICCARD DRIVE		
	STE 300		
CITY/ST/ZIP/CO:	ROCKVILLE, MD 20850-4315		

NAME:	JAMES SHARMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1355 PICCARD DRIVE		
	STE 300		
CITY/ST/ZIP/CO:	ROCKVILLE, MD 20850		

NAME: LYNN COLEMAN TITLE: DIRECTOR ADDRESS: 1355 PICCARD DRIVE SUITE 300 CITY/ST/ZIP/CO: ROCKVILLE, MD 20850	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: SONG YI TITLE: TREASURER ADDRESS: 1355 PICCARD DRIVE SUITE 300 CITY/ST/ZIP/CO: ROCKVILLE, MD 20850	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: STUART SOBERMAN TITLE: SECRETARY ADDRESS: 1355 PICCARD DRIVE SUITE 300 CITY/ST/ZIP/CO: ROCKVILLE, MD 20850	<input checked="" type="checkbox"/> OFFICER <input 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/ STUART SOBERMAN</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>STUART SOBERMAN, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>9/26/2013</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.		