

1.) CORPORATION NAME: BeamBerry Solutions, Inc.	DUE DATE: 5/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: EVGENY LEBANIDZE 13347 CONNOR DR STE F CENTREVILLE, VA	SCC ID NO: F1709528				
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>1,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,500
CLASS	AUTHORIZED				
COMMON	1,500				
4.) STATE OR COUNTRY OF INCORPORATION: DE					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 15329 OAKMERE PLACE CITY/ST/ZIP: CENTREVILLE, VA 20120	
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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.

NAME: EVGENY LEBANIDZE TITLE: P/CEO ADDRESS: 15329 OAKMERE PLACE CITY/ST/ZIP/CO: CENTREVILLE, VA 20120	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: DIMITAR GOUGLEV TITLE: VICE PRESIDENT ADDRESS: 2304 MALRAUX DR CITY/ST/ZIP/CO: VIENNA, VA 22182	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: DAVID SHALAMBERIDZE TITLE: CTO ADDRESS: 9927 MILES STONE COURT CITY/ST/ZIP/CO: VIENNA, VA 22181	<input checked="" 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.

/s/ EVGENY LEBANIDZE	EVGENY LEBANIDZE, P/CEO	7/20/2014
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.