

1.) CORPORATION NAME:

**People's Accident Information Services, Inc.**

DUE DATE: **9/30/2011**

SCC ID NO: **F1722216**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**NATIONAL REGISTERED AGENTS INC**

**4001 North Ninth Street, Suite 227**

**ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 25-18 FRANCIS LEWIS BLVD

CITY/ST/ZIP: FLUSHING, NY 11358-

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: LISA DOLAN  
TITLE: PRESIDENT  
ADDRESS: 25-18 FRANCIS LEWIS BLVD  
CITY/ST/ZIP/CO: FLUSHING, NY 11358-

OFFICER

DIRECTOR

NAME: JOSEPH GARCIA  
TITLE: VICE PRESIDENT  
ADDRESS: 25-18 FRANCIS LEWIS BLVD  
CITY/ST/ZIP/CO: FLUSHING, NY 11358-

OFFICER

DIRECTOR

NAME: LISA SPENA-GARCIA  
TITLE: CORP SEC  
ADDRESS: 25-18 FRANCIS LEWIS BLVD  
CITY/ST/ZIP/CO: FLUSHING, NY 11358-

OFFICER

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/ JOSEPH GARCIA

SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

JOSEPH GARCIA, VICE  
PRESIDENT

PRINTED NAME AND CORPORATE  
TITLE

8/15/2011

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.