

1.) CORPORATION NAME: <b>CALIFORNIA INFOPLACE, INC.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>RICHMOND CITY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>CA</b>	DUE DATE: <b>10/31/2012</b> SCC ID NO: <b>F1769647</b> 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>COMA</td> <td>200,000</td> </tr> </table>	CLASS	AUTHORIZED	COMA	200,000
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6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 1674 ORD WAY  CITY/ST/ZIP: OCEANSIDE, CA 92056
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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: JOHN G FORD TITLE: PRESIDENT ADDRESS: 1674 ORD WAY CITY/ST/ZIP/CO: OCEANSIDE, CA 92056	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MERLYNN MERRILL TITLE: ASST SECRETARY ADDRESS: 1674 ORD WAY CITY/ST/ZIP/CO: OCEANSIDE, CA 92056	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: BYRON S GEORGIU TITLE: DIRECTOR ADDRESS: 1674 ORD WAY CITY/ST/ZIP/CO: OCEANSIDE, CA 92056	<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.

/s/ JOHN G FORD	JOHN G FORD, PRESIDENT	9/11/2012
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.