

1.) CORPORATION NAME:

AdBrite, Inc.

DUE DATE: **2/28/2011**

SCC ID NO: **F1781360**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000,000
PREFER	26,300,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 731 MARKET STREET
STE 500

CITY/ST/ZIP: SAN FRANCISCO, CA 94103-

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: IGNACIO FANLO OFFICER DIRECTOR
 TITLE: CEO/PRESIDENT
 ADDRESS: 731 MARKET ST
 STE 500
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-

NAME: DANIEL ISSEN OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 731 MARKET STREET
 STE 500
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-

NAME: GONEN WILF OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 731 MARKET STREET
 STE 500
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-

NAME: CAROLINE MOON OFFICER DIRECTOR
 TITLE: VP, TREASURER
 ADDRESS: 731 MARKET STREET
 STE 500
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-

NAME: JONATHAN SHAPIRO TITLE: VP, SECRETARY ADDRESS: 731 MARKET ST STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: LUCY JACOBS TITLE: VICE PRESIDENT ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: PHILIP KAPLAN TITLE: DIRECTOR ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL WISE TITLE: DIRECTOR ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: YOUNG CHUNG TITLE: DIRECTOR ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MARK KVAMME TITLE: DIRECTOR ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: PETER SEALEY TITLE: DIRECTOR ADDRESS: 731 MARKET STREET STE 500 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94103-	<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/ JONATHAN SHAPIRO	JONATHAN SHAPIRO, VP, SECRETARY	2/28/2011
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.