

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211501123

1.) CORPORATION NAME:

Sting Alarm, Inc.

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

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NV

DUE DATE: **1/31/2011**

SCC ID NO: **F1814195**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5 LONGEVITY DRIVE

CITY/ST/ZIP: HENDERSON, NV 89014-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JONATHAN M FINE	
TITLE:	PRESIDENT	
ADDRESS:	5 LONGEVITY DIVE	
CITY/ST/ZIP/CO:	HENDERSON, NV 89014-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT M GASNER	
TITLE:	TREA	
ADDRESS:	5 LONGEVITY DRIVE	
CITY/ST/ZIP/CO:	HENDERSON, NV 89014-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JONATHAN PERRY	
TITLE:	SECRETARY	
ADDRESS:	5 LONGEVITY DRIVE	
CITY/ST/ZIP/CO:	HENDERSON, NV 89014-	

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/ ROBERT M GASNER	ROBERT M GASNER, TREA	1/5/2011
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.