

1.) CORPORATION NAME:

GL CONSULTING, INC.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1850173**

5.) STOCK INFORMATION

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| CLASS | AUTHORIZED |
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GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: HARBORSIDE FINANCIAL CENTER
1000 PLAZA 3

CITY/ST/ZIP: JERSEY CITY, NJ 07311

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.

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|-----------------|-----------------------------|---|--|
| NAME: | GEORGE LAMBRIANAKOS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| | 1000 PLAZA 3 | | |
| CITY/ST/ZIP/CO: | JERSEY CITY, NJ 07311 | | |

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|-----------------|-----------------------------|---|--|
| NAME: | ROGER ELWELL | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| | 1000 PLAZA 3 | | |
| CITY/ST/ZIP/CO: | JERSEY CITY, NJ 07311 | | |

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|-----------------|-----------------------------|---|--|
| NAME: | WILLIAM GLASOFER | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| | 1000 PLAZA 3 | | |
| CITY/ST/ZIP/CO: | JERSEY CITY, NJ 07311 | | |

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|-----------------|-----------------------------|---|--|
| NAME: | HARLAN MASTERS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| | 1000 PLAZA 3 | | |
| CITY/ST/ZIP/CO: | JERSEY CITY, NJ 07311 | | |

| | | | |
|-----------------|-----------------------------|---|-----------------------------------|
| NAME: | DINO PANAYIOTARAKOS | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| | 1000 PLAZA 3 | | |
| CITY/ST/ZIP/CO: | JERSEY CITY, NJ 07311 | | |

| | | | |
|-----------------|---------------------------------------|----------------------------------|--|
| NAME: | AMELIA ORTIZ | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | HARBORSIDE FINANCIAL CENTER | | |
| CITY/ST/ZIP/CO: | 1000 PLAZA 3 JERSEY CITY, NJ 07311 | | |

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.

| | | |
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| <u>/s/ DINO PANAYIOTARAKOS</u> | <u>DINO PANAYIOTARAKOS,</u> | <u>4/17/2013</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | SECRETARY 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.