

1.) CORPORATION NAME: <b>Integral Consulting Services Incorporated</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>RAKESH MEHROTRA 11490 COMMERCE PARK DR STE 300 RESTON, VA 20191</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>MD</b>	DUE DATE: <b>8/31/2012</b> SCC ID NO: <b>F1870346</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>COMMON</td> <td>100,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100,000
CLASS	AUTHORIZED				
COMMON	100,000				

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 704 QUINCE ORCHARD RD. SUITE 290  CITY/ST/ZIP: GAITHERSBURG, MD 20878
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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: RENU JOHRI TITLE: PRESIDENT ADDRESS: 704 QUINCE ORCHARD RD. SUITE 290 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20878	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: ABHAI JOHRI TITLE: VICE PRESIDENT ADDRESS: 704 QUINCE ORCHARD RD. SUITE 290 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20878	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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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/ RENU JOHRI	RENU JOHRI, PRESIDENT	6/27/2012
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.