

| SCC eFile | 2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 215522467 | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------|--------|-------|------|-------|
| 1.) CORPORATION NAME: PureOxyWash Inc. | | DUE DATE: 6/30/2015 | | | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SEM HAR TEFAY 5709 OAKSHORE CT BURKE, VA | | SCC ID NO: F1931635 | | | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY | | 5.) STOCK INFORMATION <table border="1" style="border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMMON</td> <td>5,000</td> </tr> <tr> <td>PREF</td> <td>5,000</td> </tr> </tbody> </table> | CLASS | AUTHORIZED | COMMON | 5,000 | PREF | 5,000 |
| CLASS | AUTHORIZED | | | | | | | |
| COMMON | 5,000 | | | | | | | |
| PREF | 5,000 | | | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | | | | | | | | |
| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 5907 OAKSHORE CT CITY/ST/ZIP: BURKE, VA 22015 | | | | | | | | |
| 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: SEM HAR TEFAY TITLE: PRES/TREAS/SEC ADDRESS: 5709 OAKSHORE CT CITY/ST/ZIP/CO: BURKE, VA 22015 | | <input checked="" 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/ SEM HAR TEFAY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | SEM HAR TEFAY, PRES/TREAS/SEC PRINTED NAME AND CORPORATE TITLE | 6/8/2015 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. | | | | | | | | |