

1.) CORPORATION NAME:

Miro Technologies, Inc.

DUE DATE: **9/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 EAST MAIN STREET**

SCC ID NO: **F1940321**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4250 EXECUTIVE SQUARE STE 300

CITY/ST/ZIP: LA JOLLA, CA 92037

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:	MARK E MCGRAW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME:	VINCE MONTEPARTE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME:	JOE M SHAHEEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME:	KENNETH A SHAW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME:	BRENT M COVINGTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME:	BRENT M COVINGTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	4250 EXECUTIVE SQUARE STE 300		
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037		

NAME: CHRISTOPHER J WOLTER TITLE: ASST SEC/TREAS ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: LAURA A HOWLEY TITLE: ASST TREAS ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: VERETT A MIMS TITLE: TREASURER ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: RUUD P ROGGEKAMP TITLE: ASST TREASURER ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: GREGORY C VOGELSPERGER TITLE: SECRETARY ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: MARK YOUNG TITLE: DIR ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: JAMES H ZRUST TITLE: DIRECTOR ADDRESS: 4250 EXECUTIVE SQUARE STE 300 CITY/ST/ZIP/CO: LA JOLLA, CA 92037	<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/ CHRISTOPHER J WOLTER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CHRISTOPHER J WOLTER, ASST SEC/TREAS PRINTED NAME AND CORPORATE TITLE	8/11/2014 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.				