



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2014**

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000565110		2. Exact name of the Corporation Astrum Solar, Inc.		
3. Principal office address 8955 Henkels Lane, Suite 508		City Annapolis Junction	State Maryland	Zip 20701
4. Business Phone No. (800) 903-6130		5. State of Incorporation Maryland		
6. Brief description of the character of business conducted in Rhode Island The sale and installation of residential and commercial photovoltaic solar systems.				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name Vadim Polikov		Vice-President Name Benjamin Davis		
Street Address 5010 Walking Stick Road, Apt J		Street Address 9110 Blues Alley, Apt M		
City Ellicott City	State Maryland	Zip 21043	City Laurel	State Maryland
Secretary Name Joshua Goldberg		Treasurer Name Vadim Polikov		
Street Address 3000 Stone Cliff Drive, Apt 306		Street Address 5010 Walking Stick Road, Apt J		
City Baltimore	State Maryland	Zip 21209	City Ellicott City	State Maryland
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name None		Director Name None		
Street Address		Street Address		
City	State	Zip	City	State
Director Name None		Director Name None		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		1,000,000,000.00	STK	\$0.0001

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

MAY 30 2014

By **205258**

A.A. 10:47 A.M.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements certified herein are true and correct.

Signature of Authorized Representative

Date

Joshua Goldberg

Print or Type Name of Authorized Representative

2/27/14