

## State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

LOGOUT

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ANNUAL REPORT YEAR: 2015		
1. Corporate ID No. 000104861		
2. Name of Corporation Emerald International, Inc.		
3. Street Address Principal Business Office:		
No. and Street: 50 GREATON DRIVE		
City or Town: PROVIDENCE State: RI Zip: 02906 Country: U	JSA	
4. Business Phone No.		
401-351-5979		
5. State of Incorporation		
State: RI	3 3S	
6. Brief Description of the Character of Business Conducted in Rhode Island  ORP TARY  ORALI ARITHMEN AND THE CHARACTER OF TH		
	ARY ARY	
TO ENGAGE IN INTERNATIONAL TRADE	SS   SS   SS   SS   SS   SS   SS   SS	
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JAN 13 2015 3 BY Car 240156		
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7. Names and Addresses of the Officers and Directors:		

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete. Title Individual Name **Address** First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country Delete PRESIDENT SOLOMON FRIEDMAN **50 GREATON DRIVE** PROVIDENCE, RI 02906 USA Select From Below Title: First Name: Middle Name: Last Name: Suffix: City: State: Zip: Country: Address: Clear Add 8. Shares Authorized and Issued Total Authorized Total Issued Class of Stock Series of Stock Par Value Per Share Shares and Outstanding Number of Shares Num c<sub>1</sub> Shares CWP 00.000.8 \$1,0000 10.00 9. 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. Filer's Contact Information (Enter a contact name, mailing address and email.) Contact Name: Solomon Friedman Business Name: Emerald International, Inc No. and Street: **50 GREATON DRIVE Principal Office** City or Town: **PROVIDENCE** State: RI Zip: 02906 Country: USA 401-351-5979 Contact Phone: Contact Email: solfriedman@aol.com Clear Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail. Signed this 15 Day of December, 2014 at 1:12:26 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the

act and deed of the corporation, and that the facts stated herein are true, as of the date of the

electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By Solomon Friedmon	
Signature of Authorized Representative of the Corporation	
This report cannot be accepted for filing if an officer has execut listed in section 7.	ed the form and he/she is not
By selecting ACCEPT you hereby acknowledge telectronic document is submitted in complian Gen. Laws § 7-1.2. You hereby agree that an or causes of action arising from the submiss • Accept • Decline	ce with R.I. y legal issues
Click HERE to Submit This Information	
Form No. 630 Revised 09/07	711 
Trevised 05/07	
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