



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

Annual Report for the year: 2019
Corporation

MAR 04 2019

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY 10729 OS

1. Entity ID Number 000267509		2. Exact name of the Corporation ENEL X NORTH AMERICA, INC.			
3. Principal Office Address 1 Marina Park Drive Suite 400		City Boston	State MA	Zip 02210	
4. NAICS Code 541611	6. Brief description of the character of business conducted in Rhode Island energy management services				
5. State of Incorporation Delaware					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name Michael Storch		Vice-President Name			
Street Address One Marina Park Drive, Suite 400		Street Address			
City Boston	State MA	Zip 02210	City	State	Zip
Secretary Name Megan Beauregard		Treasurer Name			
Street Address 100 Brickstone Square Suite 300		Street Address			
City Andover	State MA	Zip 01810	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Eliano Russo		Director Name Giulio Carone			
Street Address One Marina Park Drive, Suite 400		Street Address One Marina Park Drive, Suite 400			
City Boston	State MA	Zip 02210	City Boston	State MA	Zip 02210
Director Name Michael Storch		Director Name			
Street Address One Marina Park Drive, Suite 400		Street Address			
City Boston	State MA	Zip 02210	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		1,000	Common	0.001	
11. 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. <i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Representative Marc Rizzo				Date 2/28/19	
Signature of Authorized Representative 					

MAIL TO:
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 Website: www.sos.ri.gov