

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence. RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-150).

I. Corporate ID No. 87501	CompTea	2. Name of Corporation CompTeam Inc			
3. Street Address Principal Business Office 14240 Midway Road, Suite 150			City Farmers Branch	State T <b>X</b>	Ζιρ 75244
4. Business Phone No. 5. State of Incorporation Pelaware				<u> </u>	10211
Brief Description of the Cha					
'. NAMES AND ADDRE President Name	SSES OF THE OFF	ICERS: ("X" BOX FOR ATTA	CHMENT)   FILL IN SE	PACES BEFORE USING	ATTACHMENTS
William Weinstein			: Vice President Name		
Street Address			Michael Chartock  Street Address		
14240 Midway Road, Suite 150			14240 Midway Road, Suite 150		
City Farmers Branch	State TX	<sup>Zip</sup> 75244	City Farmers Branch	State TX	75244
Secretary Name Michael Chartock			Treasurer Name Michael Chartock		
Street Address 14240 Midway Road, Suite 150			Street Address 14240 Midway Road, Suite 150		
armers Branch	TX	<sup>ズ(p)</sup> <b>7</b> 5244	City Farmers Branch	State TX	Zip 75244
• NAMES AND ADDRES Director Name	SSES OF THE DIR	ECTORS: ("X" BOX FOR ATT	ACHMENT) TILL IN S	SPACES BEFORE USIN	G ATTACHMENTS
William Weinstein			Director Name Michael Chartock		
treet Address		<del> </del>	Street Address		
4240 Midway Road,	Suite 150		14240 Midway Road,	Suite 150	
armers Branch	TX	Zip 75244	Спу Farmers Branch	State	Zip
irector Name	······································		Director Name	ĮTX	75244
Street Address			Street Address		
ή·	State	Zip	City	State	Zip
SHARES AUTHORIZE	D	 	10. SHARES ISSUED (	 "X" BOX FOR ATTACE ION MUST BE COMPLETED	IMENT)
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/Scries	Par Value
			1,000	COMMON	.01
			I representative. If the corp	1	ľ

	FILED
File Date _	FEB 1 7 2009
Check No	By 406020
Ву:	
FC	OR SECRETARY OF STATE USE ONLY

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Under penalty of perjury, I declare and	affirm that I have examined this report,
including any accompanying schedule	s and statements, and that all statements
contained herein are true and correct.	1.0/09
_/NOCHW	$\mathcal{U}\mathcal{U}^{\gamma}$
Signature	Date
Mohammod Huda	
Print or Type Name	
Tax Director	
Title	
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