

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401 222 3040

* In accordance with R.I.G.L. 7-1. subject to a penalty fee of \$25.00.	2-1501(e), each corporation fa	ailing or refusing to file its annu	ual report within thirty (30) days a	fter the time prescribed by law) (R.I.G.L. 7-1.2-1501(c&d)) is
1. Corporate 1D No. 70831	2. Name of Corporation	mput/ Co	nsulting it)(.	
3. Street Address Principal Busines	s Office Clut Aleni	se	City Pack Nicket	State (2.1	W860
1. Business Phone No. (461) 274	-1886	5. State of his orporation KNOCL	Iskad		
6. Brief Description of the Characte Manufacture	e Sales i Se	envioler a f		1545tms	
7. NAMES AND ADDRESS! President Name	es OF THE OFFICERS:	: ("X" BOX FOR ATTAC	Fice President Name	CES BEFORE USING	ATTACHMENTS
Docas Metcalt Street Address			DORCAS METCHER Street Address		
207 Rochambeau Nenue			207 POCKAMBEAU AUE City State PROVIDENCE R1 02906		
Povidone	12	109906	PROVIDENCE	P1	02906
Dercas Metcalt			Anthony Pencek		
207 Rochambeau Nepue			138 Walten Alenue		
Physdera	State	02906	Eprinder	State C	41960
8. NAMES AND ADDRESS. Director Name	ES OF THE DIRECTOR	RS: ("X" BOX FOR ATT	ACHMENT) [] FILL IN S Director Name	PACES BEFORE USING	3 ATTACHMENTS
Ducas Metralt			Street Address		
207 Rochambau Nenue			City	State	Zip
Ponderu	1514/21	170906	Cary		
Director Name			Director Name		
Street Address			Street Address		
Citr	State	Zip	City	State	<i>Ziţ</i> :
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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
			100	COMPANIE BEC	OMPLETED TO
			THIS SECT	1011 111001	
This report must be executhis report must be execut	ted on behalf of the cor	rporation by an authorize	ed representative. If the cor or trustee.	rporation is in the hand	Is of a receiver or trustee.
		,			
			Under penalty of pe	rjury, I declare and affirm	that I have examined this repor
<u> </u>	/ ,		including any accom- contained herein are		tatements, and that all statemen
File Date 24	4-09		DO LCAS Signature	Metzalf	12/29/08 Date
Check No	98	-	Dorcas	METCALE	
	$m m \cap A$	i	T1 TC A7		