Rhode Island and Providence Plantations
Office of The Secretary of State
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Providence, Rhode Island 02903-1335
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ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 4547878 4 80246	Annual Report for the year:
Name of Corporation: ISB	
Business entity organized under the laws of the State of:	Business Entity is (check one):
for foreign entity, address and telephone number of principal office:	Business Corporation (See RIGL Chapter 7-1.1)
	[] Professional Service Corporation (See RIGL Chapter 7-5.1)
- 1	Brief statement of the character of business conducted in Rhode Island:
hone: () Address and telephone of the principal office of business entity in Rhode	Insurance Chains Investigation Consulting Service
sland (Provide street address - Not P.O. Box):	Edisaring Octobe
1345 JEFFERSM BIUL	
WARWICK RI 02886	
hone: (401) 732-1370	
RESIDENT THE NAMES OF T	THE OFFICERS ARE: DDRESS CITY/STATE ZIP CODE
KONEET A. JANNELLE 7 BOW ST. ICE PRESIDENT STREET A	DDRESS CHYSTATE ZIP CODE
Edward McCabe 68 Melbours	A 1
ECRETARY STREET A	DDRESS CITY/STATE ZIP CODE
NORMAN Champeau 345 No MAI	n ST Wansocket RI 02895
Edward Me Cape 68 Melbrukn	e RC Oppurch RJ 02886
THE NAMES OF T	HE DIRECTORS ARE: DDRESS CHYSTATE ZIP CODE
	DDRESS CITY/STATE ZIP CODE CITY/STATE 02835
RUBERT A JANNELLE 750W STREET	DDRESS CITY/STATE ZIP CODE
Edie and Mc Cabe 68 Melhou	Ino
IAME STREET A	DDRESS CTITY/STATE ZIP CODE
TROOP OF CHARGE APPROPRIED (P. J	NUMBER OF SHARES ISSUED AND APTISTANDING (Rider may be attached)
TUMBER OF SHARES AUTHORIZED (Rider may be attached)	NUMBER OF SHARES ISSUED AND ADJISTANDING (Rider may be attached)
lumber of Shares Class / Series	Number of Shares Class & Series 100
1 No PAR	100 Common No PAR
1000 Commen No PAR	(William Zub)
Date	Noteet 6 Jamesle
	ROBERT (A) JANNELLE
• /	TYPE NAME OF OFFICER SHORTING .
	OFFICER SIGNING PRESIDENT
DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	

LEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.