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

Ap copy

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 2010

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 R.I.G.L. 7-1.2-1501(a) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
164601	CTG Enterprises, Inc.			
3. Street Address Principal Business Office		City	State	Zip
16 Technology Drive #109		Irvine	CA	92618
4. Business Phone No.	5. State of Incorporation			
949-790-0010	California			

6. Brief Description of the Character of Business Conducted in Rhode Island

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Malcolm Lewis	16 Technology Drive #109	Irvine	CA	92618

Vice President Name	Street Address	City	State	Zip
Greg Shank	16 Technology Drive #109	Irvine	CA	92618

Secretary Name	Street Address	City	State	Zip
Cynthia Lewis	16 Technology Drive #109	Irvine	CA	92618

Treasurer Name	Street Address	City	State	Zip
JoAnne Rosal	16 Technology Drive #109	Irvine	CA	92618

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Malcolm Lewis	16 Technology Drive #109	Irvine	CA	92618

Director Name	Street Address	City	State	Zip
Cynthia Lewis	16 Technology Drive #109	Irvine	CA	92618

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1,000,000	CNP	$0.00

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.

[redacted]

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.

[redacted]

Signature — *Date* 2/8/2010

DEBBIE KUTZNER
Print or Type Name

ACCTG MANAGER
Title

File Date 3-5-2010
Check No. 13179
By: MNC

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Form 630 Rev. 08/08