



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

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 2011**

**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. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 56973		2. Name of Corporation PIXEL DETECTIVE, INC.			
3. Street Address Principal Business Office 266 St. Barnabe Street			City Woonsocket	State Rhode Island	Zip 02895
4. Business Phone No. same		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island security consultation, vet datum/facts and related functions**					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John J Skiffington			Vice President Name None		
Street Address 266 St. Barnabe Street			Street Address NA		
City Woonsocket	State RI	Zip 02895	City NA	State NA	Zip NA
Secretary Name None			Treasurer Name NA		
Street Address NA			Street Address NA		
City NA	State NA	Zip NA	City NA	State NA	Zip NA
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name NA		
Street Address NA			Street Address NA		
City NA	State NA	Zip NA	City NA	State NA	Zip NA
Director Name NA			Director Name NA		
Street Address NA			Street Address NA		
City NA	State NA	Zip NA	City NA	State NA	Zip NA
9. SHARES AUTHORIZED one(1)			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares one(1)	Class/Series common	Par Value none
			NA	NA	NA

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.

**FILED**

File Date MAR 21 2011

Check No. \_\_\_\_\_

By: BY 2494

FOR SECRETARY OF STATE USE ONLY

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.

John J Skiffington 19 MAR 11  
Signature Date

JOHN J SKIFFINGTON  
Print or Type Name

PRESIDENT  
Title