

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 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(cred));

subject to a penalty fee of \$25.00.			1	or and time preservoice by the	(161.6.L. 7-1.2-1301(60a)) II
1. Corporate 1D No. 144985	2. Name of Corporation	MEUSPU	BEAC		
3. Street Address Principal Business (Office		City	State	Zip
1145 PARK AVE			(RANTEL	RT	729/2
4. Business Phone No.		5. State of Incorporation			
(901)993-736.	<i>'</i> ₹	Rt			
6. Brief Description of the Character	of Business Conducted in I	Rhode Island			
FUB FOR	D & 13001	1014			
7. NAMES AND ADDRESSES			CHMENT) [] FILL IN SPA	CES REFORE HEIMO A	TTA CITA CENTRO
President Name			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS : Vice President Name		
HAT DIE MADDIL ETTEL					
Street Address	= K10-710	<u></u>	Street Address		
53 Tanger to Tank			Street Address		
City State Zip					
CHRASTE		21p	City	State	Zip
Secretary Name	.l	J. C. Tarrell			
, , , , , , , , , , , , , , , , , , , ,			Treasurer Name		
Street Address					
SHEEL MARILES			Street Address		
77.	*T	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
City	State	Zip	City	State	Zip
8 NAMES AND ADDRESSES	OF THE DIRECTOR		<u>_</u>		
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) [FILL IN SP.	ACES BEFORE USING	ATTACHMENTS
Director Name			Director Name		
Street Address			<u> </u>		201
Street Address		•	Street Address		-
		<u>, </u>	<u>:</u>		→
City	State	Zip	City	State	Zψ
*****	<u></u>				26 2500
Director Name			Director Name	***********************	
					고 우오<
Street Address			Street Address		
	•		•		S 540
City	State	Zip	City	State	Zip Com
9. SHARES AUTHORIZED	•	•	10. SHARES ISSUED ("X	 (" BOX FOR ATTACHA	IENT\□
			ISSUED SHARES — THIS SECTIO		
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	
			Three of libres	CRISS/Series	Par Value
			1		27
and the same.			1000	Commod	
This	1 1 10 0		<u> </u>		
This report must be executed	on behalf of the corp	oration by an authorize	d representative. If the corpo	ration is in the hands o	of a receiver or trustee.

this report must be executed on behalf of the corporation by the receiver or trustee.

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying sold dules and statements, and that all statements
FILED	contained herein are true and correct
File Date	12/1/20/19
Check No. JAN 26 2012	Signature Date
N 11.11.37	PATRICK HARRINGTON
By: 10145	Print or Type Name
FOR SECRETARY OF STATE USE ONLY	Tile Tile