RALPH MOLL	ate of Rhode Island and Pro Office of the Secret		Fee: \$50.00
Secretary of State	Division Of Busines 148 W. River S Providence RI 029 (401) 222-30	Street 04-2615	
Business Corporation Annual Report Filing Period: January 1 - Ma			
	7-1.2-1501(e), each corporation faili) days after the time prescribed by fee of \$25.00.		
ANNUAL REPORT YEAR:	2013		
1. Corporate ID No.	00109473		
2. Name of Corporation	The Capital Group Securities, Inc	<u>.</u>	
3. Street Address Principa	I Business Office:		
No. and Street: <u>1220 PC</u> City or Town: <u>CRANS</u>	<u>ONTIAC AVENUE, #301</u> STON	State: <u>RI</u> Zip: <u>02920</u>	Country: <u>USA</u>
4. Business Phone No.			
5. State of Incorporation			
State: <u>RI</u>			
6. Brief Description of the TO ACT AS A SECURIT	Character of Business Conductor	ed in Rhode Island	
7. Names and Addresses of	of the Officers and Directors:		
	rs must be listed. If officers and, er applicable; please delete.	/or directors have been ele	ected, the title
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State,	Zip Code, Country
TREASURER	BARRY M MISBIN	1220 PONTIAC CRANSTON, RI 029	
SECRETARY	ROBERT J RADOCCIA	1220 PONTIAC CRANSTON, RI 029	
PRESIDENT	BARRY M MISBIN	1220 PONTIAC A CRANSTON, RI 025	VENUE #301
VICE PRESIDENT	ROBERT J RADOCCIA	1220 PONTIAC	

CRANSTON, RI 02920 USA

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	2,000.00	100
Signed this 22 Day of Janu or individuals signing this is signatory, under penalties of act and deed of the corpora electronic filing, in complia	instrument constitutes of perjury, that this in ation, and that the fac	s the affirmation or ac estrument is that indiv ets stated herein are t	cknowledgement idual's act and d	of the eed or the
By BARRY M. MISBIN				
Signature of Authorized I	Representative of the C	Corporation		
	Representative of the C	Corporation		
Signature of Authorized I		-	the form and he/s	she is not
Signature of Authorized F <u>PRESIDENT</u> Title This report cannot be ac		-	the form and he/s	she is not