



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 2013

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. 152791		2. Name of Corporation TECHNOLOGY WITHOUT LIMITS, INC.		
3. Street Address Principal Business Office 57 SERVICE ROAD		City WEST WARWICK	State R.I.	Zip 02893
4. Business Phone No. (401) 286-7756		5. State of Incorporation R.I.		
6. Brief Description of the Character of Business Conducted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name JOHN F. LOPEZ JR.		Vice President Name SANDRA A. LOPEZ		
Street Address 57 SERVICE RD.		Street Address 57 SERVICE RD.		
City WEST WARWICK	State R.I.	Zip 02893	City WEST WARWICK	State R.I.
Secretary Name SANDRA A. LOPEZ		Treasurer Name JOHN F. LOPEZ JR.		
Street Address 57 SERVICE RD.		Street Address 57 SERVICE RD.		
City WEST WARWICK	State R.I.	Zip 02893	City WEST WARWICK	State R.I.
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name N/A		Director Name N/A		
Street Address		Street Address		
City	State	Zip	City	State
Director Name N/A		Director Name N/A		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED 10,000		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 100	Class/Series COMMON	Par Value 1.01

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.

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED

JAN 30 2013

3224

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.

Signature: John F. Lopez Jr. Date: 01/28/13
Print or Type Name: JOHN F. LOPEZ JR.
Title: PRESIDENT