



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 31903		2. Exact name of the Corporation RADIO-PHONE COMMUNICATIONS, INC.			
3. Principal office address 153 JAMES P. MURPHY IND. HIGHWAY			City WEST WARWICK	State RI	Zip 02893
4. Business Phone No. (401) 823-3600			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island Sales, Market, Service Mobile telephone, Dispatch, 2-way Radio Equipment and Products.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Joseph A. Accetta			Vice-President Name Rosalie A. Accetta		
Street Address P. O. Box 676			Street Address P. O. Box 676		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
Secretary Name Rosalie A. Accetta			Treasurer Name Joseph A. Accetta		
Street Address P. O. Box 676			Street Address P. O. Box 676		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Joseph A. Accetta			Director Name		
Street Address P. O. Box 676			Street Address		
City Exeter	State RI	Zip 02822	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			500	Common	NO PAR

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

Form No. 630
 Revised: 01/2012

FILED

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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.

Joseph A. Accetta 3-9-13
 Signature of Authorized Representative Date

Joseph A. Accetta

Print or Type Name of Authorized Representative