



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. 7-1.2-1504(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. 789543		2. Name of Corporation UNICOM, INC.			
3. Street Address Principal Business Office 369 South Main Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-521-3100		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Computer sales, repair and all other lawful acts of incidental thereto.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Barry Jay Schiff			Vice President Name Barry Jay Schiff		
Street Address 68 Mauran Street			Street Address 68 Mauran Street		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Barry Jay Schiff			Treasurer Name Barry Jay Schiff		
Street Address 68 Mauran Street			Street Address 68 Mauran Street		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Barry Jay Schiff			Director Name		
Street Address 68 Mauran Street			Street Address		
City Cranston	State RI	Zip 02910	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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			1000	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.

FILED

JUN 04 2013

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

BY 1521

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.

Barry Jay Schiff 5/22/13
Signature Date

Barry Jay Schiff
Print or Type Name
President
Title