



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*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.*

**ANNUAL REPORT YEAR:** 2014

**1. Corporate ID No.** 000747712

**2. Name of Corporation** MIB Insurance Services, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 111 N. SEPULVEDA BOULEVARD, SUITE 245

City or Town: MANHATTAN BEACH

State: CA Zip: 90266 Country: USA

**4. Business Phone No.**

3107759020

**5. State of Incorporation**

State: CA

**6. Brief Description of the Character of Business Conducted in Rhode Island**

INSURANCE AGENCY SERVICES AND SALES

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	RICHARD J MOORE	5 DAWNAY CLOSE ASCOT, BERKSHIRE, SL5 7PQ, UK GBR
CFO	GAVIN TAYLOR	10 SCHOOL LANE CHELMSFORD, CM1 7DN, UK GBR
SECRETARY/DIRECTOR	GABRIELA M PADILLA	3503 DEERFORD ST LAKEWOOD, CA 90712 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1,000,000.00	1000

**9. 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.**

**Signed this 3 Day of January, 2014 at 5:49:08 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By GABRIELA M. PADILLA

Signature of Authorized Representative of the Corporation

SECRETARY/DIRECTOR

Title

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

Form No. 630  
Revised 09/07

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