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 2015

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.	2. Exact name of the Corporation
132373	**Barlo Signs International, Inc.**

3. Principal office address	City	State	Zip
100 North Stanton, Suite 2700	**El Paso**	TX	79901

4. Business Phone No.	5. State of Incorporation
603-882-2638	**TX**

6. Brief description of the character of business conducted in Rhode Island
sale, installation and maintenance of signage

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X" BOX FOR ATTACHMENT) ☐

President Name	City	State	Zip
Arthur Bartlett			
Street Address: **158 Greeley Street**	**Hudson**	**NH**	**03051**

Vice-President Name	City	State	Zip
Street Address			

Secretary Name	City	State	Zip
Pamela Bartlett			
Street Address: **158 Greeley Street**	**Hudson**	**NH**	**03051**

Treasurer Name	City	State	Zip
Pamela Bartlett			
Street Address: **158 Greeley Street**	**Hudson**	**NH**	

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X" BOX FOR ATTACHMENT) ☐

Director Name	City	State	Zip
Street Address			

Director Name	City	State	Zip
Street Address			

Director Name	City	State	Zip
Street Address			

Director Name	City	State	Zip
Street Address			

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED (X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
1000		$1.00

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.

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.

Pamela Bartlett — 1/26/15
Signature of Authorized Representative — Date

Pamela Bartlett
Print or Type Name of Authorized Representative

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

FILED
FEB 05 2015
BY 1504

Form No. 630
Revised: 01/2012