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
000529669	Global Industrial Services Inc.

3. Principal office address	City	State	Zip
6800 Jericho Turnpike, Suite 102W	Syosset	NY	11791

4. Business Phone No.	5. State of Incorporation
(516) 802-4855	NY

6. Brief description of the character of business conducted in Rhode Island
Janitorial Services

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

President Name	Street Address	City	State	Zip
Scott Schwartz	23 Pleasant Lane	Oyster Bay Cove	NY	11771

Vice-President Name	Street Address	City	State	Zip

Secretary Name	Street Address	City	State	Zip
Perry Fine	260 Dolphin Drive	Hewlett Neck	NY	11598

Treasurer Name	Street Address	City	State	Zip
Lonnie Fine	1304 Seawane Drive	Hewlett Harbor	NY	11557

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

Director Name	Street Address	City	State	Zip
Scott Schwartz	23 Pleasant Lane	Oyster Bay Cove	NY	11771

Director Name	Street Address	City	State	Zip
Lonnie Fine	1304 Seawane Drive	Hewlett Harbor	NY	11557

Director Name	Street Address	City	State	Zip
Perry Fine	260 Dolphin Drive	Hewlett Neck	NY	11598

Director Name	Street Address	City	State	Zip

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
200	CNP	0.00

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.

File Date _____

Check No _____

By: ~~2015 MAY 27 AM 9:17~~

FOR SECRETARY OF STATE USE ONLY

FILED
MAY 27 2015
BY

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 of Authorized Representative — Date: 3/16/15

Scott Schwartz President
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012

2015 MAR 19 AM 10:20
SECRETARY OF STATE
CORPORATIONS DIV