RI SOS Filing Number: 201692116950 Date: 02/08/2016 4:00 PM

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 2016

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		
1657141	1224 Metro, Inc.		
3. Principal office address: 1224 Smith Street	City: Providence	State: RI	Zip: 02908
4. Business Phone No.: 646 645-3493	5. State of Incorporation: RI		
6. Brief description of the character of business conducted in Rhode Island: Cellular Sales			

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

President Name: Abdul Baig (ABDUL BAIG)	Vice-President Name: SAME
Street Address: 684 King Philip St	Street Address:
City: Fall River / State: MA / Zip: 02724	City: / State: / Zip:
Secretary Name: SAME	Treasurer Name: SAME
Street Address:	Street Address:
City: / State: / Zip:	City: / State: / Zip:

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

Director Name: ABDUL BAIG	Director Name: Same
Street Address: 684 King Philip St.	Street Address:
City: Fall River / State: MA / Zip: 02724	City: / State: / Zip:
Director Name: Same	Director Name: Same
Street Address:	Street Address:
City: / State: / Zip:	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
0	0	0

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.

RECEIVED
2016 FEB -8 PM 4:06
SECRETARY OF STATE
CORPORATIONS DIV

File Date 4:06 pm
Check No
By:
FOR SECRETARY OF STATE USE ONLY

FILED
FEB 08 2016
By C8851446

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: 2/8/16

M. Kohli
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012 133226-1-1063406

ICM