

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: 2016

1. Corporate ID No. 000551183

2. Name of Corporation Experian Fraud Prevention Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 475 ANTON BOULEVARD

City or Town: COSTA MESA State: CA Zip: 92626 Country: USA

4. Business Phone No.

7148307446

5. State of Incorporation

State: DE

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

Business Services

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country		
PRESIDENT	CHARLES CHUNG	475 ANTON BOULEVARD COSTA MESA, CA 92626 USA		
TREASURER	BRIAN HERB	475 ANTON BLVD. COSTA MESA, CA 92626 USA		
SECRETARY	JASON ENGEL	475 ANTON BOULEVARD COSTA MESA, CA 92626 USA		
VICE PRESIDENT	ROBIN NORRIS	475 ANTON BLVD. COSTA MESA, CA 92626 USA		
ASSISTANT TREASURER	MARYAM DAMAVANDI	475 ANTON BLVD.		

		COSTA MESA, CA 92626 USA
DIRECTOR	CRAIG BOUNDY	475 ANTON BOULEVARD
		COSTA MESA, CA 92626 USA
DIRECTOR	DARRYL GIBSON	475 ANTON BOULEVARD
		COSTA MESA, CA 92626 USA
DIRECTOR	KERRY WILLIAMS	475 ANTON BOULEVARD
		COSTA MESA, CA 92626 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	1,000.00	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 11 Day of February, 2016 at 6:16:59 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 BRIAN HERB

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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