



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. 000869915		2. Exact name of the Corporation ERES International, Inc.			
3. Principal office address 1401 Regency Drive East		City Savoy	State IL	Zip 61874	
4. Business Phone No. 217-356-5945		5. State of Incorporation Illinois			
6. Brief description of the character of business conducted in Rhode Island Maintenance and Update of Equipment					
President Name Abbas A. Butt			Vice-President Name None		
Street Address 2109 Crossgate Court			Street Address		
City Champaign	State IL	Zip 61822	City	State	Zip
Secretary Name Timothy A. Worstell			Treasurer Name John F. Touma		
Street Address 219 North Third St.			Street Address 1401 Regency Drive East		
City Fisher	State IL	Zip 61843	City Savoy	State IL	Zip 61874
Director Name Fadlo T. Touma			Director Name None		
Street Address 1401 Regency Drive East			Street Address		
City Savoy	State IL	Zip 61874	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
ATTACHMENT					
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			20,000.00	stk	\$0.0000

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.

Signature of Authorized Representative Abbas A. Butt Date 2-12-2016

Print or Type Name of Authorized Representative
Abbas A. Butt

FILED
FEB 22 2016
By HL 16750