



**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

Handwritten: J.R.G. - Controller, Inc.

Handwritten: 6 Westridge Court

Handwritten: North Kingstown, RI

Handwritten: 02852

Handwritten: USA

Handwritten: 4012958803

Handwritten: RI

Handwritten: 000090873

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000090873

2. Name of Corporation J.R.G. - Controller, Inc.

3. Street Address Principal Business Office:

No. and Street: 6 WESTRIDGE COURT

City or Town: NORTH KINGSTOWN

State: RI

Zip: 02852

Country: USA

4. Business Phone No.

4012958803

FILED

5. State of Incorporation

State: RI

FEB 22 2016

BY KL 147

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

TO ENGAGE IN THE BUSINESS OF PROVIDING MANAGEMENT CONSULTING SERVICES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	JAMES R GANUNG	6 WESTRIDGE COURT NORTH KINGSTOWN, RI 02852 USA
SECRETARY	JAMES R GANUNG	6 WESTRIDGE COURT NORTH KINGSTOWN, RI 02852 USA
PRESIDENT	JAMES R GANUNG	6 WESTRIDGE COURT NORTH KINGSTOWN, RI 02852 USA

2/20/2016

State of Rhode Island and Providence Plantations - Domestic Profit Corporation Filings

DIRECTOR

JAMES R GANUNG

6 WESTRIDGE COURT
NORTH KINGSTOWN, RI 02852 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	2,000.00	100.00

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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: JAMES R GANUNG

Business Name:

No. and Street: 6 WESTRIDGE COURTCity or Town: NORTH KINGSTOWNState: RIZip: 02852Country: USA

Contact Phone: _____ ext: _____

Contact Email: _____

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 20 Day of February, 2016 at 10:20:07 AM. *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 JIM GANUNG*James R Ganung*

Signature of Authorized Representative of the Corporation

Make Corrections**Accept**Form No. 630
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