

State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615
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SECRETA CORPOR

Filing period: January 1 - March 1						- 320
Filing Fee: \$50.00 *FAILU	JRE TO FILE	THIS REPORT BY	MARCH 31 WILL F	RESULT IN	A \$25.00	PENAL PAYER TO
1. Entity ID Number	2. Exact name	of the Corporation.	entar et dene le acons			
122400	Contr	act Man	agement	Inter	nation	CO COVS.
3. Principal Office Address			Leity		State	Zip
554 Jepson LN - 4. Business Phone Number			middleto	വധ	RII.	02842
461-855-2313			R.I.			
6. Brief description of the cha		ss conducted in Rho			Basin Jahra (1980)	
Consulting	Managem	1	No section of the sec	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
7. List ALL officers (names ar President Name	Check the box to indicate an attachment					
Seth Redlich			Vice-President Name			
Street Address 554 – Lepson	LN		Street Address		<u></u>	
middle town	State R. T.	00842	City	-	State	Zip
Secretary Name		<u> </u>	Treasurer Name			
Leonard Kat Street Address	2 man					
1/02 Springh	Street Address					
city Portsmouth	State R I	02871	City		State	Zip
8. List ALL directors (names a Director Name	ind addresses)		Director Name	heck the bo	x to indicate	an attachment
Street Address	Street Address					
A:	1					
City	State	Zip	City	S	State	Zip
9. Shares Authorized 🚟 🤭	10. Shares Issued Check box to indicate an attachment					
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES		PAR VALUE
			10	Common		1.00
11. This report must be execut	ed on behalf of:	the corporation by an	authorized represent	ative: If the	Corporation	is in the bonds of
Under penalty of perjury, I d	eclare and affir	m that I have exami	rporation by the receined this report: incli	. Open road	TA CON TOTAL AND THE STREET	
Under penalty of perjury, I declare and affirm that I have examined this report; including any accompanying schedules and statements contained herein are true and correct. Name of Authorized Representative						
Seth Redlice		Date				
Signature of Authorized Representative						
SIGN DOCUMENT HERE						
				-		

FILED

MAY 1 1 2016

By # 274036