



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

148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

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SECRETARY OF STATE
CORPORATIONS DIV.
2016 MAY 11 AM 11:46

Profit Corporation Annual Report for the year: 2013

Filing period: January 1 - March 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE

1. Entity ID Number <u>122400</u>		2. Exact name of the Corporation <u>Contract Management International Corp.</u>	
3. Principal Office Address <u>554 Jepson LN.</u>		City <u>Middletown</u>	State <u>R.I.</u>
		Zip <u>02842</u>	
4. Business Phone Number <u>401-855-2313</u>		5. State of Incorporation <u>R.I.</u>	
6. Brief description of the character of business conducted in Rhode Island <u>Consulting Management</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>Seth Redlich</u>		Vice-President Name	
Street Address <u>554 Jepson LN</u>		Street Address	
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	
Secretary Name <u>Leonard Katzman</u>		Treasurer Name	
Street Address <u>162 Springhill RD</u>		Street Address	
City <u>Portsmouth</u>	State <u>RI</u>	Zip <u>02871</u>	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized			
10. Shares Issued		Check box to indicate an attachment <input type="checkbox"/>	
NUMBER OF SHARES <u>10</u>		CLASS/SERIES <u>Common</u>	PAR VALUE <u>1.00</u>
This information is currently of record in the Department of State. Changes require an additional filing.			
11. 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. <i>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.</i>			
Name of Authorized Representative <u>Seth Redlich</u>		Date <u>5/10/16</u>	
Signature of Authorized Representative 		SIGN DOCUMENT HERE	

FILED

MAY 11 2016

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By 274036