



**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

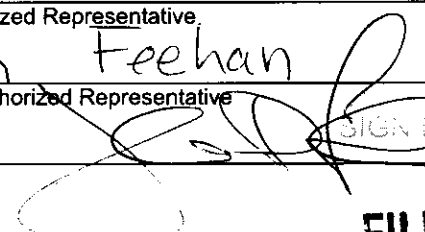
RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV

2016 MAY 26 AM 10:59

**Profit Corporation Annual Report for the year: 2016**

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 <b>000853511</b>		2. Exact name of the Corporation <b>Crosstel Tandem, Inc.</b>		
3. Principal Office Address <b>1791 O.G. Skinner Dr., Suite D</b>		City <b>West Point</b>	State <b>GA</b>	Zip <b>31833</b>
4. Business Phone Number <b>470-414-2021</b>		5. State of Incorporation <b>Georgia</b>		
6. Brief description of the character of business conducted in Rhode Island <b>Wholesale Telecommunications Provider</b>				
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
President Name <b>MV Thomas</b>		Vice-President Name <b>John Feehan</b>		
Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		
City <b>West Point</b>	State <b>GA</b>	Zip <b>31833</b>	City <b>West Point</b>	State <b>GA</b>
Secretary Name <b>John Feehan</b>		Treasurer Name <b>John Feehan</b>		
Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		
City <b>West Point</b>	State <b>GA</b>	Zip <b>31833</b>	City <b>West Point</b>	State <b>GA</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
Director Name <b>MV Thomas</b>		Director Name <b>John Feehan</b>		
Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		Street Address <b>1791 O.G. Skinner Dr, Suite D</b>		
City <b>West Point</b>	State <b>GA</b>	Zip <b>31833</b>	City <b>West Point</b>	State <b>GA</b>
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		<b>0</b>	<b>CWP</b>	<b>0.0001</b>
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. <b>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.</b>				
Name of Authorized Representative <b>John Feehan</b>			Date <b>4-18-16</b>	
Signature of Authorized Representative  <b>SIGN DOCUMENT HERE</b>				

**FILED**

**MAY 26 2016 11:01**

**BY 4 275261**

**FILED**

**MAY 2 2016**

**BY**