

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2016

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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Table of Allera

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2016 JUL 25 AM 8: 43

1. Entity ID Number	2. Exact name of the	ne Cornoration			<del></del>		
1070265	The Law Offices of Eric P.W. Hall, P.C.						
	The Law Offices	OI LIIC F.W. I			1	· · · · · · · · · · · · · · · · · · ·	
Principal Office Address			City		State	Zip	
244 Weybosset Street			Providence		RI	02903	
4. Business Phone Number			5. State of Incorporation				
(401) 432-7000			Rhode Island				
Brief description of the character of business conducted in Rhode Island     Software Development and Sales							
7. List ALL officers (names and addresses)  Check the box to indicate an attachment							
President Name Eric P.W. Ha	Vice-President Name						
Street Address 244 Weyboss	Street Address						
City Providence	State RI	<sup>Zip</sup> <b>02903</b>	City	· ·	State	Zip	
Secretary Name			Treasurer Name				
Street Address			Street Address				
City	State Zi	p	City		State	Zip	
8. List ALL directors (names and addresses)  Check the box to indicate an attachment							
Director Name			Director Name				
Street Address			Street Address				
City	State Zip	0	City		State	Zip	
9. Shares Authorized	Shares Authorized 10. Shares Iss		ued Check the box to indicate an attachment				
This information is currently of	NUMBER OF						
Department of State.		100,000	100,000		0		
Changes require an additional f							
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.							
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.							
Name of Authorized Representative					Date		
Eric P.W. Hall, Esq.	. 1		<b>07/19/</b> 2016				
Signature of Authorized Representative							

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

JUL 25 2016

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