



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Non-Profit Corporation  
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 001288298

2. Name of Corporation EHS Compliance

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 285 RIVERSIDE DRIVE

City or Town: TIVERTON

State: RI Zip: 20878 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

OUR MISSION IS TO PROVIDE SAFETY AND ENVIRONMENTAL EDUCATION AND TRAINING TO NON-PROFIT CORPORATIONS AND SMALL BUSINESSES. EHS COMPLIANCE, INC. IS HERE TO HELP BY FINDING EFFECTIVE, UNIMPOSING, AND VALUE ADDED SOLUTIONS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	PEDRO ADRIAN MEDRANO	285 RIVERSIDE DRIVE TIVERTON, RI 02878 USA

DIRECTOR	MIGUEL MEDRANO	10133 SAN LUIS AVENUE SOUTH GATE , CA 90802 USA
DIRECTOR	STEVEN WONG	1016 E. 23RD STREET LOS ANGELES , CA 90011 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

PEDRO ADRIAN MEDRANO 285 RIVERSIDE DRIVE TIVERTON , RI 02878

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 15 Day of November, 2016 at 11:33:05 AM by the authorized person. *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By PEDRO ADRIAN MEDRANO  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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