



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

Annual Report for the year: 2017  
Corporation

- Filing period: January 1 - March 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <u>6009</u>		2. Exact name of the Corporation <u>MRM, Inc.</u>			
3. Principal Office Address <u>350 Seaside Drive</u>		City <u>Jamestown</u>		State <u>RI</u>	Zip <u>02835</u>
4. NAICS Code <u>61</u>		6. Brief description of the character of business conducted in Rhode Island <u>Consulting</u>			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <u>Charlotte Zarlengo</u>			Vice-President Name <u>F. John Zarlengo</u>		
Street Address <u>350 Seaside Drive</u>			Street Address <u>350 Seaside Drive</u>		
City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>	City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>
Secretary Name <u>Charlotte Zarlengo</u>			Treasurer Name <u>F. John Zarlengo</u>		
Street Address <u>350 Seaside Drive</u>			Street Address <u>350 Seaside Drive</u>		
City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>	City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <u>Charlotte Zarlengo</u>			Director Name <u>F. John Zarlengo</u>		
Street Address <u>350 Seaside Drive</u>			Street Address <u>350 Seaside Dr.</u>		
City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>	City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the 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.					
10. Shares Issued		CLASS/SERIES			
NUMBER OF SHARES		PAR VALUE			
<u>100</u>		<u>Common</u>		<u>No par value</u>	
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 <u>Charlotte Zarlengo</u>			Date <u>1/14/2017</u>		
Signature of Authorized Representative <u>Charlotte Zarlengo</u>			Date <u>1/14/2017</u>		

FILED

JAN 19 2017

BY 6125