



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

Fee: \$50.00

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

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2017

1. Corporate ID No. 000142870

2. Name of Corporation Consumer Assist Network Association, Inc.

3. Street Address Principal Business Office:

No. and Street: 11222 QUAIL ROOST DRIVE

City or Town: MIAMI

State: FL

Zip: 33157

Country: USA

4. Business Phone No.

5. State of Incorporation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

81

6. Brief Description of the Character of Business Conducted in Rhode Island

MEMBERSHIP PROGRAMS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN FROBOSE	260 INTERSTATE N CIRCLE SE ATLANTA, GA 30339 USA
TREASURER	ANDREW CHUNG	11222 QUAIL ROOST DRIVE

		MIAMI, FL 33157 USA
SECRETARY	JEANNIE ARAGON-CRUZ	11222 QUAIL ROOST DRIVE MIAMI, FL 33157 USA
DIRECTOR	JOHN FROBOSE	260 INTERSTATE N CIRCLE SE ATLANTA, GA 30339 USA
DIRECTOR	DAWN MARIE LAMNIN	11222 QUAIL ROOST DRIVE MIAMI, FL 33157 USA
DIRECTOR	KIM LEE SWACKHAMMER	11222 QUAIL ROOST DRIVE MIAMI, FL 33157 USA
DIRECTOR	JULIE COSIO	11222 QUAIL ROOST DRIVE MIAMI, FL 33157 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.0000	1,500.00	1500

9. 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.

Signed this 6 Day of February, 2017 at 2:41:50 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JEANNIE ARAGON-CRUZ
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations
All Rights Reserved