



**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. 000157436

2. Name of Corporation Tangram Insurance Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 140 SECOND STREET, SUITE 230

City or Town: PETALUMA

State: CA Zip: 94952 Country: USA

4. Business Phone No.

5. State of Incorporation

State: CA

ARTICLE III

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

NAICS Code

6

52

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

INSURANCE BROKERAGE SERVICES - MANAGING GENERAL AGENT

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
TREASURER	DANIELE SEBASTIANI	140 SECOND STREET, SUITE 230 PETALUMA , CA 94952 USA
DIRECTOR	F. MICHAEL HEFFERNAN	140 SECOND STREET, SUITE 230 PETALUMA , CA 94952 USA

SECRETARY	F. MICHAEL HEFFERNAN	140 SECOND STREET, SUITE 230 PETALUMA , CA 94952 USA
DIRECTOR	JOHN PRICHARD JR.	140 SECOND STREET, SUITE 230 PETALUMA , CA 94952 USA
PRESIDENT	REKHA SKANTHARAJA	140 SECOND STREET, SUITE 230 PETALUMA, CA 94952 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	10,000.00	10000

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 20 Day of February, 2017 at 11:57:42 AM. *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 DANIELE SEBASTIANI
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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