State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

Entity ID Number	2. Exact name	2. Exact name of the Corporation							
000094816		ENTO							
3. Principal Office Address				City				,	
137 CYPRESS AVE	MAINSTAY FISHERIES Incipal Office Address 7 CYPRESS AVE P.O. BOX 24 Incipal Office Address 7 CYPRESS AVE P.O. BOX 24 Incipal Office Address Incipal Office Addre			TIVERTON			State RI	Zip	
4. Business Phone Number					5. State of Incorporation			02878	
<u>401-474-</u> 7098					RI				
	ter of business con	ducted in Rhod	e Island	<u>K</u> I					
			0 1010110						
7. List ALL officers (names and a									
President Name				Check the box to indicate an attachment Vice-President Name					
RICHARD F MUDD	MAINSTAY FISHERIES cipial Office Address CYPRESS AVE P.O. BOX 24 mess Phone Number -474-7098 description of the character of business conducted in Rhode Island MERCIAL FISHING, ET AL ALL officers (names and addresses) In Name HARD F MUDD ddress BOX 24 State Zip RI 02878 CRTON RI 02878 LL directors (names and addresses) Name HARD F MUDD dress BOX 24 State Zip RI 02878 LL directors (names and addresses) Name HARD F MUDD dress BOX 24 State Zip RI 02878 LL directors (names and addresses) Name HARD F MUDD dress BOX 24 State Zip RI 02878 LL directors (names and addresses) Name HARD F MUDD dress BOX 24 State Zip RTON RI 02878 Authorized Zip RTON RI 02878 SAuthorized IO. Shares issued matton is currently of record in the shart of State. GOO require an additional filing. sport must be executed on behalf of the corporation by an authorized this report must be executed on behalf of the corporation by the record in the shart of the corporation by the record in the shart of the corporation by the record in the shart of the corporation by the record in the shart of the corporation by the record in the shart of the corporation by the record this report must be executed on behalf of the corporation by the record in the shart of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must be executed on behalf of the corporation by the record this report must								
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<u>P.O</u> . BOX 24				P.O. BOX 24					
City	State Zin		City						
TIVERTON	1	l .		1 '		State	I	ip	
Secretary Name					TIVERTON RI			02878	
RICHARD F MUDD				Treasurer Name RICHARD F MUDD					
Street Address				Street Add	ARD F MUDD				
P.O. BOX 24									
City	State	Zip		P.O. BOX 24 City		State			
TIVERTON	l rt - l	•		1 *	· · · ·		Zi	•	
8. List ALL directors (names and addresses)				TTADI				02878	
Director Name				Director N		Check the bo	x to indica	ate an attachment	
RICHARD F MUDD									
Street Address				Street Address					
P.O. BOX 24					Street Address				
	State	Zip		City					
TIVERTON	1	•		City		State	Zip)	
9. Shares Authorized			lssued		Charlette to				
This information is currently of r		NUMBER OF SHAPES			box to indicate an attachment				
Department of State.				CLASS/SE	RIES		PAR VALUE		
Change require an additional S		600		STK		<u> </u>	0		
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Under penalty of periury 1 de	clare and offi	4ha4 4	y ule rece	iver or truste	:e.				
Name of Authorized Representative	;					- Love	 _		
	<u></u>	_				\ \ ate	* 2-/`	フーノア	
Signature of Authorized Representative									
RICHARD MUDD S	<u>-/Lll</u>	<u> </u>	Mu	dd					

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

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