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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			<u> </u>					
39193		2. Exact name of the Corporation THE SYGMA NETWORK, INC.						
3. Principal Office Address		-	City		State	Zip		
1390 ENCLAVE PARKWAY	VE PARKWAY		HOUSTON		TX	77077		
4. NAICS Code	6. Brief desc	ription of the chara	cter of business	conducted in Rhode	Island			
42 - Wholesale Trade	BROADLIN	BROADLINE FOOD DISTRIBUTION						
5. State of Incorporation								
DELAWARE								
7. List ALL officers (names an	d addresses)			Check	the box to i	ndicate an attachment 🕑		
	GREGORY S. KELLER			Vice-President Name BARBARA B. GREEN				
	ddress 1390 ENCLAVE PARKWAY			Street Address 1390 ENCLAVE PARKWAY				
City HOUSTON	State TX	^{Zip} 77077	City HOUST	ON	State TX	^{Zip} 77077		
Secretary Name CARMEN NG				Treasurer Name GREGORY S. KEYES				
Street Address 1390 ENCLAVE PARKWAY		Street Address 1390 ENCLAVE PARKWAY						
City HOUSTON	State TX	^{Zip} 77077	City HOUST	y HOUSTON		^{Zíp} 77077		
8. List ALL directors (names a	nd addresses)			Check	the box to i	ndicate an attachment 🔲		
Director Name RUSSELL T. LIBBY		Director Name THOMAS L. BENE						
Street Address 1390 ENCLAVE PARKWAY		Street Address 1390 ENCLAVE PARKWAY						
City HOUSTON	State TX	^{Zip} 77077	City HOUST	ON	State TX	Zip 77077		
GREGORY S. KELLER		Director Name						
Street Address 1390 ENCLAVE PARKWAY		Street Address						
City HOUSTON	State TX	^{Zip} 77077	City		State	Zip		
9. Shares Authorized		10. Shares iss				ndicate an attachment 🔲		
nis information is currently of record in the epartment of State.		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE		
•	111.a.a.	100		COMMON		\$1.00		
Changes require an additional f	iling.				·			
11. This report must be execut trustee, this report must be exe	ted on behalf of the	corporation by an a	authorized repres	I sentative. If the corpo	oration is in t	he hands of a receiver or		
Under penalty of perjury, i d	eclare and affirm t	hat I have examin	ed this report, i	ncluding any accon	npanying so	chedules and		
statements, and that all state Name of Authorized Represen		herein are true an	d correct.	-11 EN	Date	· · · · · · · · · · · · · · · · · · ·		
BARBARA B. GREEN, VP TAX			<u>,</u> %-	FILED		•		
Signature of Authorized Repre				78K	<u> </u>			
olynature of Authorized Nepre	Scillative /	 	TO BEET THE PERSON	FEB 2 4 2017	371			
IAIL TO:		1	i. E e e e	718	\sim			

FORM 630 - Revised: 02/2017

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

SYGMA Network, Inc.

President Gregory S. Keller Chief Financial Officer Dawn Rezkalla VP of Administration; CIO Vice President Vice President & Secretary Vice President, Tax Vice President Vice President Adam S. Skorecki 1390 Enclave Parkway, Houston, TX 77077	OFFICERS: TITLE NAME BUSINESS ADDRESS	TITLE NAME President Gregory S. Keller
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Russell T. Libby

