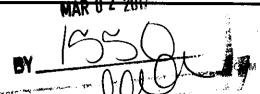
RI SOS Filing Number: 201737220550 Date: 3/2/2017 4:00:00 PM

State of Rhode Island an Department of Sta			ivision		_		
Annual Report for the year: 2017					STAMP		
Corporation → Filing period: January 1 - N → Filing Fee: \$50.00 → Penalty: Additional \$25.00 f		filed by April 1.	-			FOR	
1. Entity ID Number	2. Exact name of the Corporation						
486053	Nispe, Inc.						
3. Principal Office Address 38 Bellevue Avenue, Suite H	·				State RI	Zip 02840	
4. NAICS Code 81 - Other Services (except Pul 5. State of Incorporation Rhode Island				conducted in Rhode Is r vessels of all kinds			
7. List ALL officers (names and add	Ive 5		the box to	indicate an attachment L			
President Name Denise Cole	Vice-Presiden	t Name					
Street Address 2503 S. Pine Terrace Lane			Street Address				
City Liberty Lake	State WA	^{Zip} 99019-3260	City		State	Zip	
Secretary Name Steven M. McInnis			Treasurer Name Denise Cole				
Street Address 38 Bellevue Avenue	Street Address 2503 S. Pine Terrace Lane						
^{City} Newport	State RI	^{Zip} 02840	City Liberty Lake		State WA	A Zip 99019-3260	
8. List ALL directors (names and ac		Check	the box to i	indicate an attachment			
Director Name Denise Cole			Director Name	•			
Street Address 2503 S. Pine Terrac			Street Address	3			
City Liberty Lake	State WA	^{Zip} 99019-3260	City		State	Zip	
Director Name			Director Name		<u>, I</u>		
Street Address	Street Address	3					
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Issue			he box to i	ndicate an attachment L	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SE	HARES	CLASS/SERIES		PAR VALUE	
				Common		\$.01 Par	
11. This report must be executed or rustee, this report must be execute	<u>d on behalf of th</u>	e corporation by the	e receiver or tre	ustee.			
Under penalty of perjury, I declar statements, and that all statement Name of Authorized Representative	e and affirm tha ts contained he	t I have examined	this report, in	ncluding any accom		chedules and	
Denise Cole			· · · · · · · · · · · · · · · · · · ·		Date	1 1 1 1 1 1 1	
Signature of Authorized Representa	flye .			FILED	, J. (6117	
Commence (-6 CC	SIGN DOCU	MENT HEI	RE			
IAIL TO: livision of Business Services			M	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	ं स		

148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040

Website: www.sos.ri.gov



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