



**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.** 000162963

**2. Name of Corporation** EYP Mission Critical Facilities, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 81 MAIN STREET

City or Town: WHITE PLAINS

State: NY

Zip: 10601

Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: NY

**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**

SALES & SERVICES

**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
SECRETARY	RISHI VARMA	81 MAIN STREET WHITE PLAINS, NY 10601 USA
CEO	SCOTT WILSON	81 MAIN STREET WHITE PLAINS, NY 10601 USA

CFO	TIMOTHY C. STONESIFER	81 MAIN STREET WHITE PLAINS, NY 10601 USA
DIRECTOR	JEREMY K. COX	81 MAIN STREET WHITE PLAINS, NY 10601 USA
DIRECTOR	RISHI VARMA	81 MAIN STREET WHITE PLAINS, NY 10601 USA
DIRECTOR	TIMOTHY C. STONESIFER	81 MAIN STREET WHITE PLAINS, NY 10601 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		\$0.0100	1,000.00	1000

**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 7 Day of March, 2017 at 5:55:47 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 NATALIE PICKENS  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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