



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 \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 001329890		2. Exact name of the Corporation Launch Manufacturing Inc.			
3. Principal Office Address 535 Centerville Road Suite 302B			City Warwick	State RI	Zip 02886
4. NAICS Code 31-33 - Manufacturing ☒		6. Brief description of the character of business conducted in Rhode Island Coordinate and manufacture indoor trampoline systems			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Robert Arnold			Vice-President Name Tajaun Law		
Street Address 535 Centerville Road Suite 302B			Street Address 535 Centerville Road Suite 302B		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment ☐		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100		.01
11. 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. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative Robert Arnold				Date 3-1-2017	
Signature of Authorized Representative					

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
MAR 17 2017
 By