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	2. Exact name of the Corporation		
00002737	EEM INC		
3. Principal Office Address	**City**	**State**	**Zip**
3313 MILLWOOD WAY	SAINT AUGUSTINE	FL	32086
4. NAICS Code	**6. Brief description of the character of business conducted in Rhode Island**		
531190	CONSULTING REAL ESTATE		
5. State of Incorporation			
RI			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
EDWARD E MANFREDI	LORRAINE A. MANFREDI
Street Address: 3313 MILLWOOD WAY	Street Address: Same
City: S. AUGUSTINE; State: FL; Zip: 32086	City; State; Zip
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	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	100	CNP	0

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	Date
EDWARD E MANFREDI	3-20-17

Signature of Authorized Representative: Edward E Manfredi

FILED
MAR 23 2017
By 402

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 02/2017