



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 <b>98392</b>		2. Exact name of the Corporation <b>Taubman Law Offices, LTD.</b>			
3. Principal Office Address <b>P.O. Box 277</b>			City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>
4. NAICS Code <b>54</b>		6. Brief description of the character of business conducted in Rhode Island <b>Practice of Law</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Elliot Taubman, Esq.</b>			Vice-President Name		
Street Address <b>High Street</b>			Street Address		
City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>	City	State	Zip
Secretary Name <b>Elliot Taubman, Esq.</b>			Treasurer Name <b>Elliot Taubman, Esq.</b>		
Street Address <b>High Street</b>			Street Address <b>High Street</b>		
City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>	City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Elliot Taubman, Esq.</b>			Director Name		
Street Address <b>High Street</b>			Street Address		
City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>	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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES <b>100</b>	CLASS/SERIES <b>A</b>	PAR VALUE <b>No Par Value</b>
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.					
<b>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.</b>					
Name of Authorized Representative <b>Elliot Taubman, Esq.</b>				Date <b>May 26, 2017</b>	
Signature of Authorized Representative 					

## MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov

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