Annual Report Hing Period: June 1 - June 30 In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual export within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of 525.00. ANNUAL REPORT YEAR: 2017 1. Corporate ID No. 000924886 2. Name of Corporation Providence Fire Fighters Public Safety 3. State of Incorporation State: RI ARTICLE III Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here. NAICS Code Image: PROVIDENCE State: 92 PRINTERY STREET City or Town: PROVIDENCE State: 21 pr. 02904 Country: USA 5. Foreign Corporation. Enter Principal Office Address No. and Street: City or Town: State: Zip: 02904 Country: USA 5. Foreign Corporation. Enter Principal Office Address No. and Street: Zip: Country: Gity or Town: State: Zip: Country: State: 6. Brief Description of the Character					
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	7. Names and Addresses of the Officers and Directors:				
	All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete				

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
INCORPORATOR	DEREK MICHAEL SILVA	92 PRINTERY STREET
		PROVIDENCE, RI 02904 USA
DIRECTOR	PAUL ANDREW DOUGHTY	92 PRINTERY STREET
		PROVIDENCE, RI 02904 USA
DIRECTOR	DEREK MICHAEL SILVA	92 PRINTERY STREET
		PROVIDENCE, RI 02904 USA
DIRECTOR	ADAM CHUMAN	92 PRINTERY STREET
		PROVIDENCE, RI 02904 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

DEREK SILVA <u>92 PRINTERY STREET, 3RD FLOOR</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02904</u>

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 15 Day of June, 2017 at 2:35:22 PM by the authorized person. *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By <u>DEREK M SILVA</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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