

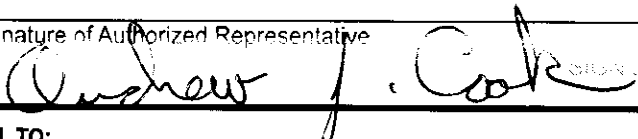


State of Rhode Island and Providence Plantations

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 000545222		2. Exact name of the Corporation CAPTAIN COOK, INC.			
3. Principal Office Address 11 BURDICKVILLE ROAD			City BRADFORD	State RI	Zip 02808
4. NAICS Code 81 - Other Services (except I)		6. Brief description of the character of business conducted in Rhode Island BOAT CAPTAIN AND BOAT SURVEYOR/CONSULTANT			
5. State of Incorporation 07/23/2010					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name ANDREW COOK			Vice-President Name ANDREW COOK		
Street Address 11 BURDICKVILLE RD			Street Address 11 BURDICKVILLE RD		
City BRADFORD	State RI	Zip 02808	City BRADFORD	State RI	Zip 02808
Secretary Name ANDREW COOK			Treasurer Name ANDREW COOK		
Street Address SAME			Street Address SAME		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			2,000	STOCK	0.00
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 ANDREW COOK					Date 08/15/2017
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

AUG 24 2017

BY

FILED