RI SOS Filing Number: 201755296650 Date: 12/22/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2018 Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00	fee if form is no	ot filed by April 1.			_		
1. Entity ID Number 000152268	2. Exact name of the Corporation  DESMARK INDUSTRIES, INC.						
3. Principal Office Address 530 Wellington Avenue			City Cranston	on RI		Zip 02910	
4. NAICS Code 339999	Brief description of the character of business conducted in Rhode Island     Create custom Christmas ornaments and stitched products.						
State of Incorporation     Rhode Island							
7. List ALL officers (names and ac		Check the box to indicate an attachment					
President Name John Caito III	Vice-President Name						
Street Address 530 Wellington Av	Street Address						
City Cranston	State RI	<sup>Zip</sup> 02910	City		State	Zıp	
Secretary Name			Treasurer Name				
Street Address			Street Address				
City	State	Zip	City		State	Zıp	
8. List ALL directors (names and	addresses)	<del>-</del> -	<u> </u>	Check	the box to i	indicate an attachment	
Director Name John Caito III			Director Name				
Street Address 530 Wellington Avenue			Street Address				
City Cranston	State RI	<sup>Zip</sup> 02910	City		State	Zip	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Iss	10. Shares Issued		Check the box to indicate an attachment		
This information is currently of record in the Department of State.		NJMBER O	F SHARES	CLASS/SERIES		PAR VALUE	
Changes require an additional filing.		200	200		Common \$		
				•			
<ol> <li>This report must be executed trustee, this report must be execu-</li> </ol>	<u>ited on behalf of</u>	the corporation by	the receiver or tr	ustee.			
Under penalty of perjury, I decl statements, and that all statem	ents contained			ncluding any acco	mpanying s	chedules and	
Name of Authorized Representative    Date						RIT	
Signature of Authorized Represe	dative	SIGN DO	CUMENT HERE	1 1 1 1 1 1		1 1	
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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: 10/2017