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 not filed by April 1.

FILED
JAN 18 2018
BY 2076

1. Entity ID Number	2. Exact name of the Corporation
123113	TECS DONUTS, INC.

3. Principal Office Address	City	State	Zip
40 Carrie Avenue	East Providence	RI	02916-0000

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
722513	operate a donut shop
5. State of Incorporation: RI	

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

President Name	Street Address	City	State	Zip
Steven Andrade	71 Fairview Avenue	Rehoboth	MA	02769-

Vice-President Name	Street Address	City	State	Zip
Christopher Andrade	62 Cameron Way	Rehoboth	MA	02769-

Secretary Name	Street Address	City	State	Zip
Edward Andrade	141 Fairway Drive	Attleboro	MA	02703-

Treasurer Name	Street Address	City	State	Zip
Edward Andrade	141 Fairway Drive	Attleboro	MA	02703-

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

Director Name	Street Address	City	State	Zip
Steven Andrade	71 Fairview Avenue	Rehoboth	MA	02769-
Edward Andrade	141 Fairway Drive	Attleboro	MA	02703-

Director Name	Street Address	City	State	Zip
Christopher Andrade	62 Cameron Way	Rehoboth	MA	02769-
none	none	none	none	none

9. Shares Authorized

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
102	Common	No Par

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
Steven Andrade	President	1/02/2018

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