



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED
STAMP

FEB 26 2018

BY 34589 *[Signature]*

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.

1. Entity ID Number 22639		2. Exact name of the Corporation HOME & COMMERCIAL SECURITY INC.			
3. Principal Office Address 44 BLANDING ROAD		City REHOBOTH		State MA	Zip 02769
4. NAICS Code 238900		6. Brief description of the character of business conducted in Rhode Island INSTALLATION AND SALES OF SECURITY DEVICES			
5. State of Incorporation MASSACHUSETTS					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name HENRY C SIDOK JR			Vice-President Name CYNTHIA M SALEEBA		
Street Address 73 MILLER STREET			Street Address 38 BAY STATE ROAD		
City SEEKONK		State MA	Zip 02771	City REHOBOTH	
		State MA	Zip 02769		
Secretary Name JASON H SIDOK			Treasurer Name HENRY C SIDOK JR		
Street Address 26 CARPENTER STREET			Street Address 73 MILLER STREET		
City REHOBOTH		State MA	Zip 02769	City SEEKONK	
		State MA	Zip 02771		
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name HENRY C SIDOK JR			Director Name CYNTHIA M SALEEBA		
Street Address 73 MILLER STREET			Street Address 38 BAY STATE ROAD		
City SEEKONK		State MA	Zip 02771	City REHOBOTH	
		State MA	Zip 02769		
Director Name JASON H SIDOK			Director Name NONE		
Street Address 26 CARPENTER STREET			Street Address		
City REHOBOTH		State MA	Zip 02769	City	
		State	Zip		
9. Shares Authorized 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.		10. Shares Issued		CLASS/SFRIES	
		NUMBER OF SHARES		PAR VALUE	
		1200		COMMON	
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 HENRY C SIDOK JR				Date ✓ 2/20/18	
Signature of Authorized Representative <i>[Handwritten Signature]</i>				SIGN DOCUMENT HERE	