



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 AMP

FEB 26 2018

BY 34589

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 ☐					
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 ☐					
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 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
		1200		COMMON	NO PAR VALUE
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>Henry C Sidok Jr</i> PAID SIGN DOCUMENT HERE					