



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILEDAnnual 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.

FEB 26 2018

BY

1852

1. Entity ID Number 000016413		2. Exact name of the Corporation Pedrick Yacht Designs Inc												
3. Principal Office Address 3 Ann Street			City Newport	State RI	Zip 02840									
4. NAICS Code 541330		6. Brief description of the character of business conducted in Rhode Island Marine architecture and naval engineering												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name David Pedrick			Vice-President Name None											
Street Address 67 Second Street			Street Address											
City Newport	State RI	Zip 02840	City	State	Zip									
Secretary Name David Pedrick			Treasurer Name David Pedrick											
Street Address 67 Second Street			Street Address 67 Second Street											
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>500</td> <td></td> <td>None</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	500		None			
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500		None												
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 David Pedrick				Date 2/21/2018										
Signature of Authorized Representative <i>David R. Pedrick</i>														

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov