RI SOS Filing Number: 201859304990 Date: 2/26/2018 4:00:00 PM

State of Rhode Island an			Vivision			<u></u>
Department of State - Business Services Di				FILE	D	STAMP
Annual Report for the year: 2018			_	EED 9.6	2010	C) 45.4449
<ul> <li>→ Filing period: January 1 - March 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by April 1.</li> </ul>			FEB 2 6 2018  SECHETARY OF STATE USE OF CY			
1. Entity ID Number	2. Exact name	of the Corporation				
273238	Tech 911 Inc.					
3. Principal Office Address			City		State	Zip
982 West Shore Road			Warwick		RI	02889
4. NAICS Code		Brief description of the character of business conducted in Rhode Island				
541519	Computer sales and service.					
5. State of Incorporation  Rhode Island						
7. List ALL officers (names and add	resses) Check the box to indicate an attachment					
President Name Christopher Dias			Vice-President Name Kelli Waite Dias			
Street Address			1			
982 W Shore Road			Street Address 982 W Shore Road			
City Warwick	State RI	<sup>Zip</sup> 02889	City Warwic	ik	State RI	<sup>Zip</sup> 02889
Secretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City		State	Zip
8. List ALL directors (names and addresses)				Check the	e box to ind	icate an attachment
Director Name			Director Name	9		
Street Address			Street Address			
City	State	Zip	City		State	Zip
Director Name	<u> </u>	1	Director Name			
Street Address			Street Address			
City	State	Zip	City		State	Zlp
						210
Shares Authorized     This information is currently of record	i In the	10. Shares Issue		Check the CLASS/SERIES	box to indi	cate an attachment  PAR VALUE
Department of State.	- ··· - ··· -	1000		STK		\$0.01
Changes require an additional filling.						
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.						
Chais to Ohea to ViaS  Signature of Authorized Representative						
SIGN DOCUMENT HERE						
MAIL TO:						

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov