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Corporation

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018

FILED

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FEB **26 2018**

FOR SECRETARY OF STATE USE OILLY

→ Filing period: January 1 - March 1

 → Filing period: January → Filing Fee: \$50.00 → Penalty: Additional \$25. 	.00 fee if form is no	t filed by April 1.		BY	W50	OSE OLEA	
1. Entity ID Number 273238	2. Exact name Tech 911	e of the Corporation	n			<u>-</u>	
3. Principal Office Address	"		City		State	Zip	
982 West Shore Road					RI	02889	
4. NAICS Code	6. Brief descri	ption of the charac	ter of business of	conducted in Rhode	e Island		
541519	Computer sa	ales and service.					
5. State of Incorporation Rhode Island	\neg						
7. List ALL officers (names and	addresses)				ck the box to i	ndicate an attachment	
President Name Christopher Di	ias		Vice-Presiden	t Name Kelli Waite	Dias		
Street Address 982 W Shore Ro	oad		Street Address 982 W Shore Road				
^{City} Warwick	State RI	^{Zip} 02889	City Warwick	k	State RI	^{Zip} 02889	
Secretary Name				Treasurer Name			
Street Address			Street Address				
City	State	Zip	City	<u> </u>	State	Zip	
8. List ALL directors (names an	I nd addresses)			Chec	k the box to in	l ndicate an attachment □	
Director Name					*** ****		
<u></u>			Director Name				
Street Address			Street Address		<u>.</u> .		
Street Address	State	Zip			State	Zip	
<u> </u>	State	Zip	Street Address		State	Zip	
City	State	Zip	Street Address City		State	Zip	
City Director Name	State	Zip Zip	Street Address City Director Name		State	Zip	
City Director Name Street Address City 3. Shares Authorized	State	Zip	Street Address City Director Name Street Address City	Chec	State	Zip adicate an attachment	
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Director Name Street Address City B. Shares Authorized This information is currently of red Department of State. Changes require an additional fill 1. This report must be execute rustee, this report must be execute.	State ecord in the ing. ed on behalf of the co	Zip 10. Shares Issumined for a state of the	Street Address City Director Name Street Address City Jed SHARES uthorized represente receiver or truit of this report, in	Chec CLASS/SERI STK entative. If the corp	State k the box to in the state of the stat	Zip Idicate an attachment PAR VALUE \$0.01 The hands of a receiver or	
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MAIL TO:

Division of Business Services

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

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