RI SOS Filing Number: 201859597770 Date: 3/1/2018 4:00:00 PM

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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

FILED

Annual Report for the year:	2018
Corporation	

MAR 01 2018

BY\_\_\_\_

- → Filing period: January 1 March 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by April 1

Entity ID Number	2. Exact name	2. Exact name of the Corporation					
143985	Nikya-C,	Nikya-C, Inc.					
3. Principal Office Address	3. Principal Office Address			State	Zip		
15 Scotch Pine Circle			Wellesley	MA	02481		
4. NAICS Code	6. Brief descri	6. Brief description of the character of business conducted in Rhode Island					
531120	To engage in	To engage in every aspect and phase of the real estate business.					
5 State of Incorporation							
RI							
7. List ALL officers (names ar	nd addresses)			Check the box to i	ndicate an attachment 🖸		
President Name Katerina N. Contos			Vice-President Name	Vice-President Name Anastasia Contos			
Street Address 15 Scotch Pine Circle			Street Address 12 Otis Place				
City Wellesley	State MA	<sup>Zıp</sup> 02481	City Boston	State MA	Zip 02108		
Secretary Name Yannis Conte	os			easurer Name Anastasia Contos			
Street Address 15 Scotch Pine Circle		Street Address 12 Otis Place					
City Wellesley	State MA	<sup>Zip</sup> 02481	City Boston	State MA	A Zip 02108		
8. List ALL directors (names	and addresses)			Check the box to	indicate an attachment 🔲		
Director Name Katerina N. Co	ontos		1	stasia Contos			
Street Address 15 Scotch Pin			Street Address 12 C	Otis Place			
City Wellesley	State MA	<sup>Zip</sup> 02481	City Boston	State	A Zip 02108		
Director Name Yannis Contos		Director Name					
Street Address 15 Scotch Pine Circle		Street Address					
City Wellesley	State MA	Zip 02481	City	State	Zip		
9. Shares Authorized		10. Shares Issued			indicate an attachment		
This information is currently of record in the Department of State.  Changes require an additional filing.			OF SHARES	CLASS/SERIES PAR VALUE			
		300			No par value		
11. This report must be exec	uted on behalf of the	corporation by an	authorized representa	tive. If the corporation is in	the hands of a receiver or		

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and

SIGN DOCUM

MAIL TO:

Name of Authorized Representative

Signature of Authorized Representative

Katerina N. Contos, President

Division of Business Services

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

statements, and that all statements contained herein are true and correct.

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 01 2018

FORM 630 - Revised: 10/2017

2-20-18

## ANNUAL REPORT FOR THE YEAR 2018

## NIKYA-C, INC. ID #143985

7. Names and Addresses of the Officers

Vice President: Yannis Contos

15 Scotch Pine Circle Wellesley, MA 02481

**FILED** 

MAR 01 2018

# 143985