



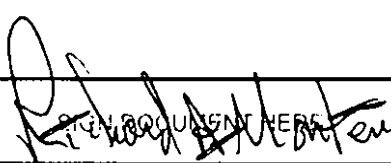
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

RECEIVED
SECRETARY OF STATE
CORPORATE DIVISION

2018 MAR - 1 - PM 3:34

1. Entity ID Number 001663332		2. Exact name of the Corporation D&D Consulting, Inc.			
3. Principal Office Address 156 Earle Street			City Woonsocket	State RI	Zip 02895
4. NAICS Code 541613		6. Brief description of the character of business conducted in Rhode Island Sales Consulting			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Richard Monteiro			Vice-President Name Richard Monteiro		
Street Address 156 Earle Street			Street Address 156 Earle Street		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
Secretary Name Richard Monteiro			Treasurer Name Richard Monteiro		
Street Address 156 Earle Street			Street Address 156 Earle Street		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment ☐					
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES 1000	CLASS/SERIES Common	PAR VALUE 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 Richard Monteiro, President					Date 17 JAN 2018
Signature of Authorized Representative 					FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

MAR 01 2018

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FORM 630 - Revised: 10/2017