



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

Annual Report for the year: **2018**
Corporation

ST-100

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

1. Entity ID Number 505203		2. Exact name of the Corporation DIAZ TAX & BOOKKEEPING SERVICES INC.			
3. Principal Office Address 903 BROAD STREET			City PROVIDENCE	State RI	Zip 02907
4. NAICS Code 541213		6. Brief description of the character of business conducted in Rhode Island IMMIGRATION, INSURANCE, NOTARY, PAYROLL, BOOKKEEPING, AND TAX PREPARATION SERVICES.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name YANKO A. DIAZ			Vice-President Name		
Street Address 903 BROAD STREET			Street Address		
City PROVIDENCE	State RI	Zip 02907	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
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		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES	CLASS/SLRIS	PAR VALUE	
		100	STK	0.00	
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 YANKO A. DIAZ				Date 03/03/2018	
Signature of Authorized Representative <i>YANKO A. DIAZ</i>				SIGN DOCUMENT HERE FILED <i>a</i>	

MAR 05 2018

BY *0706*