



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.

1. Entity ID Number 11506		2. Exact name of the Corporation Narragansett Translations & Interpreting, Inc.												
3. Principal Office Address 115 Paine Avenue		City Cranston		State RI	Zip 02910									
4. NAICS Code 541930		6. Brief description of the character of business conducted in Rhode Island Translation and Interpretation Services												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Suzanne A. Janke			Vice-President Name None											
Street Address 115 Paine Avenue			Street Address											
City Cranston	State RI	Zip 02910	City	State	Zip									
Secretary Name None			Treasurer Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>None</td> <td>none</td> <td>none</td> </tr> <tr> <td>none</td> <td>none</td> <td>none</td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	None	none	none	none	none	none
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		None	none	none										
none	none	none												
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 Suzanne A. Janke, President				Date 05-03-2018										
Signature of Authorized Representative Suzanne A. Janke, President				FILED										