



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

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 SECRETARY OF STATE
 CORPORATION DIV
 2018 JUN 11
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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 000147381		2. Exact name of the Corporation Arsenal Design, Inc.			
3. Principal Office Address 4548 Turnberry Ct.			City Plano	State TX	Zip 75024
4. NAICS Code 541890 54 - Professional, Scientific, and		6. Brief description of the character of business conducted in Rhode Island Graphic Design			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Mark Raebel			Vice-President Name none		
Street Address 4548 Turnberry Ct.			Street Address		
City Plano	State TX	Zip 75024	City	State	Zip
Secretary Name Audra Raebel			Treasurer Name Audra Raebel		
Street Address 4548 Turnberry Ct.			Street Address 4548 Turnberry Ct.		
City Plano	State TX	Zip 75024	City Plano	State TX	Zip 75024
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		1,000		STK	
		PAR VALUE		100	
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 Mark Raebel				Date 5/25/18	
Signature of Authorized Representative <i>Mark S. Raebel</i>				FILED SIGN DOCUMENT HERE	

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

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