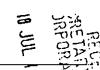
RI SOS Filing Number: 201872506980 Date: 7/17/2018 10:43:00 AM





State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2009

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25	0.00 fee if form is no	ot filed by April 1.				
1, Entity ID Number 000125002		2. Exact name of the Corporation MAKAI, INC				
3. Principal Office Address 121 PECKHAM LANE	<u> </u>		City MIDDLETOWN	State RI	Zıp 02842-5317	
4. NAICS Code 811490		6. Brief description of the character of business conducted in Rhode Island BOAT RESTORATION				
5. State of Incorporation RI						
7. List ALL officers (names ar	nd addresses)			Check the box to indic	ate an attachment	
President Name MICHAEL FLETCHER			Vice-President Name			
Street Address 121 PECKHAM LANE			Street Address			
City MIDDLETOWN	State RI	Zip 02842-5317	City	State	Zıp	
ecretary Name			Treasurer Name MICHAEL FLETCHER			
Street Address			Street Address 121 PECKHAM LANE			
City	State	Zip	City MIDDLETOWN	State RI	Zip 02842-5317	
8. List ALL directors (names a	and addresses)	'	-	Check the box to indic	ate an attachment 🔲	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		40.05	<u> </u>	Objects the field to be did	-t	
Shares Authorized This information is currently of record in the		10. Shares Issue		Check the box to indicate an attachment Chassisters		
Department of State. Changes require an additional filing.		100		N	NO PAR	
			, <u></u>		· · · · · · ·	
11. This report must be execu				f the corporation is in the l	nands of a receiver or	
trustee, this report must be e. Under penalty of perjury, I	declare and affirm	that I have examined	i this report, including a	any accompanying sche	dules and	
statements, and that all sta Name of Authorized Represe		i nerem are due <u>ano</u>	correct.	Date		
MICHAEL FLEYCHER				01/10	12018	
Signature of Authorized Repr	esentative	Sie N DOC	DEV HER FILI	ED		
Muhl Jo		 -				

Division of Business Services

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

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

FORM 630 - Revised: 10/2017