



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2019**

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 07 2019

BY

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1. Entity ID Number 000062703		2. Exact name of the Corporation Management Concepts Inc.			
3. Principal Office Address 97 Armistice Blvd.			City Pawtucket	State RI	Zip 02860
4. NAICS Code 531311	6. Brief description of the character of business conducted in Rhode Island Real Estate Property Management				
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 Joseph R. Gianino			Vice-President Name None		
Street Address 97 Armistice Blvd.			Street Address None		
City Pawtucket	State RI	Zip 02860	City None	State None	Zip None
Secretary Name None			Treasurer Name None		
Street Address None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
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 None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
Director Name None			Director Name None		
Street Address None			Street Address None		
City None	State None	Zip None	City None	State None	Zip None
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 PAR VALUE			
		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 Joseph R. Gianino				Date January 01, 2019	
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services

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