



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.

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2019 JAN 14 PM 12: 32

1. Entity ID Number - 1682707		2. Exact name of the Corporation INETICO, Inc.			
3. Principal Office Address 10 King Street			City Pawtucket	State RI	Zip 02860
4. NAICS Code 424900 424990		6. Brief description of the character of business conducted in Rhode Island Import, Export, Wholesale			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Esmel Sheriff			Vice-President Name		
Street Address 64 Rhode Island Ave			Street Address		
City Pawtucket	State RI	Zip 02860	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 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
		0			0
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 				Date 01/14/2019	
Signature of Authorized Representative					

FILED
 JAN 14 2019
 BY JO M2VWF