



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

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 SECRETARY OF STATE
 CORPORATIONS DIVISION
 2019 JAN 24 PM 1:04

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.

1. Entity ID Number 000150569		2. Exact name of the Corporation GNOSYS SYSTEMS, INC.			
3. Principal Office Address 198 Broadway		City Providence		State RI	Zip 02903
4. NAICS Code 541720		6. Brief description of the character of business conducted in Rhode Island Software Research and Development			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Dimitri Panagou		Vice-President Name n/a			
Street Address 198 Broadway		Street Address			
City Providence,	State RI	Zip 02903	City	State	Zip
Secretary Name n/a		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 n/a		Director Name n/a			
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 100	CLASS/SERIES STK	PAR VALUE \$0.0100	
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 Dimitri Panagou				Date 1/19/2019	
Signature of Authorized Representative				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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JAN 24 2019

BY **MFNEN**