



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

1. Entity ID Number 1669747		2. Exact name of the Corporation HIGH REZ CONSULTING, INC.	
3. Principal Office Address 67 BEACON AVENUE		City JAMESTOWN	State RI
		Zip 02835	
4. NAICS Code 541330	6. Brief description of the character of business conducted in Rhode Island CONSULTING		
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 DENNIS A. QUELCH		Vice-President Name NONE	
Street Address 67 BEACON AVENUE		Street Address	
City JAMESTOWN	State RI	Zip 02835	
Secretary Name DENNIS Q. QUELCH		Treasurer Name DENNIS A. QUELCH	
Street Address 67 BEACON AVENUE		Street Address 67 BEACON AVENUE	
City JAMESTOWN	State RI	Zip 02835	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name DENNIS Q. QUELCH		Director Name	
Street Address 67 BEACON AVENUE		Street Address	
City JAMESTOWN	State RI	Zip 02835	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State.		10. Shares Issued	
Changes require an additional filing.		NUMBER OF SHARES 100	CLASS/SHARES COMMON
		PAR VALUE NO PAR VALUE	
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 DENNIS A. QUELCH			Date 1-18-19
Signature of Authorized Representative 			

FILED

JAN 24 2019

BY 22477

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