



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

FILED

FEB 11 2019

BY 10589

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 102143		2. Exact name of the Corporation EPOXYTECH, INC.			
3. Principal Office Address 718 PARK EAST DRIVE			City WOONSOCKET	State RI	Zip 02895
4. NAICS Code 325411		6. Brief description of the character of business conducted in Rhode Island FORMULATIONS AND MIXING OF CHEMICALS FOR ADHESIVE INDUSTRY			
5. State of Incorporation DELAWARE					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name SUKIRTEE PATEL			Vice-President Name KIRAN PATEL		
Street Address 14 REDBROOK CROSSING			Street Address 14 REDBROOK CROSSING		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Secretary Name KIRAN PATEL			Treasurer Name KIRAN PATEL		
Street Address 14 REDBROOK CROSSING			Street Address 14 REDBROOK CROSSING		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name KIRAN PATEL			Director Name		
Street Address 14 REDBROOK CROSSING			Street Address		
City LINCOLN	State RI	Zip 02865	City	State	Zip
Director Name SUKIRTEE PATEL			Director Name		
Street Address 14 REDBROOK CROSSING			Street Address		
City LINCOLN	State RI	Zip 02865	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
		100		COMMON	NO PAR
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 KIRAN PATEL				Date 1/21/2019	
Signature of Authorized Representative 					