



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

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV.
 2019 FEB 14 AM 9:54

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 001663332		2. Exact name of the Corporation D&D Consulting, Inc.												
3. Principal Office Address 156 Earle Street			City Woonsocket	State RI	Zip 02895									
4. NAICS Code 541613		6. Brief description of the character of business conducted in Rhode Island Sales 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 Richard Monteiro			Vice-President Name Richard Monteiro											
Street Address 156 Earle Street			Street Address 156 Earle Street											
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895									
Secretary Name Richard Monteiro			Treasurer Name Richard Monteiro											
Street Address 156 Earle Street			Street Address 156 Earle Street											
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895									
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.			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NUMBER OF SHARES</th> <th style="text-align: center;">CLASS/SERIES</th> <th style="text-align: center;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1000</td> <td style="text-align: center;">Common</td> <td style="text-align: center;">No Par Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1000	Common	No Par Value			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
1000	Common	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 Richard Monteiro, President					Date 24 FEB 2019									
Signature of Authorized Representative 														

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

FEB 14 2019

9:54

BY CA-CK 137