



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

2019 MAR 11 AM 10:07  
 SECRETARY OF STATE  
 CORPORATION 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 62494		2. Exact name of the Corporation DTECH, INC.			
3. Principal Office Address 9 Spink Street			City Wickford	State RI	Zip 02852
4. NAICS Code 541715		6. Brief description of the character of business conducted in Rhode Island  Development of hardware and software products			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Timothy S. Wasco			Vice-President Name None		
Street Address 9 Spink Street			Street Address		
City Wickford	State RI	Zip 02852	City	State	Zip
Secretary Name Timothy S. Wasco			Treasurer Name Timothy S. Wasco		
Street Address 9 Spink Street			Street Address 9 Spink Street		
City Wickford	State RI	Zip 02852	City Wickford	State RI	Zip 02852
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Timothy S. Wasco			Director Name		
Street Address 9 Spink Street			Street Address		
City Wickford	State RI	Zip 02852	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued		Check the box to indicate an attachment <input type="checkbox"/>
			NUMBER OF SHARES	CLASS/SERIES	
			1,000	Common	\$ .01 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. <b>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.</b>					
Name of Authorized Representative Timothy S. Wasco, President				Date February 28, 2019	
Signature of Authorized Representative <i>Timothy S. Wasco</i>					

**FILED**

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

MAR 11 2019  
 BY *[Signature]*  
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