



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

FILED

APR 15 2019 *2*

BY Boyer

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 000545222		2. Exact name of the Corporation Captain Cook Inc.			
3. Principal Office Address 11 Burdickville Rd			City Bradford	State RI	Zip 02808
4. NAICS Code 541990		6. Brief description of the character of business conducted in Rhode Island <i>yacht Delivery + Marine Surveyor</i>			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Andrew Cook			Vice-President Name same		
Street Address 11 Burdickville Rd			Street Address		
City Bradford	State RI	Zip 02808	City	State	Zip
Secretary Name same			Treasurer Name same		
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			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.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		2000	common	0.01	
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. <i>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.</i>					
Name of Authorized Representative ANDREW J. COOK					Date 4-12-19
Signature of Authorized Representative <i>Andrew J. Cook</i> SIGN DOCUMENT HERE					

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov