



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.

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SECRETARY OF STATE
CORPORATIONS
DIV
2019 JUL 18 AM 9:29

1. Entity ID Number 788968		2. Exact name of the Corporation Tacti Design Inc.	
3. Principal Office Address 39 Winter Ave.		City Warwick	State RI
		Zip 02889	
4. NAICS Code 547100	6. Brief description of the character of business conducted in Rhode Island Medical/ Consumer product development engineering		
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 Dana Zitnick		Vice-President Name same	
Street Address 39 Winter Ave.		Street Address	
City Warwick	State RI	Zip 02889	
Secretary Name same		Treasurer Name same	
Street Address		Street Address	
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	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized 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 none	CLASS/SERIES
			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 Dana Zitnick		Date 7/18/19	
Signature of Authorized Representative 			

SIGN DOCUMENT ELECTRONICALLY

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

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FORM 630 - Revised: 10/2017