



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

FILED -

**Annual Report for the year:** 2019  
**Corporation**

AUG 29 2019

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY 9270 OS

|  |                    |  |   |                          |                     |
|--|--------------------|--|---|--------------------------|---------------------|
| 1. Entity ID Number<br><b>64010</b>  |                    | 2. Exact name of the Corporation<br><b>MertCo, Inc</b>   |   |                          |                     |
| 3. Principal Office Address<br><b>248 Eustis Avenue</b>  |                    |  | City<br><b>Newport</b>  | State<br><b>RI</b>       | Zip<br><b>02840</b> |
| 4. NAICS Code<br><b>561320</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Personnel Services</b> |   |                          |                     |
| 5. State of Incorporation<br><b>RI</b>   |                    |  |   |                          |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |  |   |                          |                     |
| President Name<br><b>Janice Kennedy</b>  |                    |  | Vice-President Name<br><b>Janice Kennedy</b>  |                          |                     |
| Street Address<br><b>248 Eustis Ave</b>  |                    |  | Street Address<br><b>248 Eustis Avenue</b>  |                          |                     |
| City<br><b>Newport</b>   | State<br><b>RI</b> | Zip<br><b>02840</b>  | City<br><b>Newport</b>  | State<br><b>RI</b>       | Zip<br><b>02840</b> |
| Secretary Name<br><b>Janice Kennedy</b>  |                    |  | Treasurer Name<br><b>Janice Kennedy</b>   |                          |                     |
| Street Address<br><b>248 Eustis Ave</b>  |                    |  | Street Address<br><b>248 Eustis Ave</b>   |                          |                     |
| City<br><b>Newport</b>   | State<br><b>RI</b> | Zip<br><b>02840</b>  | City<br><b>Newport</b>  | State<br><b>RI</b>       | Zip<br><b>02840</b> |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |  |   |                          |                     |
| Director Name<br><b>None</b>   |                    |  | Director Name<br><b>None</b>  |                          |                     |
| Street Address   |                    |  | Street Address  |                          |                     |
| City   | State              | Zip  | City  | State                    | Zip                 |
| Director Name<br><b>None</b>   |                    |  | Director Name<br><b>None</b>  |                          |                     |
| Street Address   |                    |  | Street Address  |                          |                     |
| City   | State              | Zip  | City  | State                    | Zip                 |
| 9. Shares Authorized   |                    |  | 10. Shares Issued <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.<br><br>Changes require an additional filing.   |                    |  | NUMBER OF SHARES  |                          | CLASS/SERIES        |
|  |                    |  | 500   |                          | Common              |
|  |                    |  | PAR VALUE   |                          | 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.<br><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<br><b>JANICE F. KENNEDY</b>  |                    |  |   | Date<br><b>8/27/2019</b> |                     |
| Signature of Authorized Representative<br><i>Janice F. Kennedy</i>   |                    |  |   | SIGN DOCUMENT HERE       |                     |