RI SOS Filing Number: 202031364470 Date: 1/8/2020 11:01:00 AM

Annual Report for the year corporation → Filing period: January 1 - I → Filing Fee: \$50.00 → Penalty: Additional \$25.00 to 1 Entity ID Number DOI 690 838 Principal Office Address A TWE NAICS Code TI3 990 State of Incorporation List ALL officers (names and address) Control of the component of the componen	March 1 fee if form is n 2. Exact nar 6. Brief desc	ne of the Corpora	City Caty racter of business cond	2020 de para de la lacted in Rhode Isl		0: 59 Zip O 2 9 0 9	
→ Filing period: January 1 - I → Filing Fee: \$50.00 → Penalty: Additional \$25.00 i I. Entity ID Number OOI 690 838 B. Principal Office Address R. NAICS Code TI3 990 S. State of Incorporation C. List ALL officers (names and according to the composition) T. List ALL officers (names and according to the composition)	2. Exact nar 2. Exact nar 6. Brief desc	ne of the Corpora	City Caty racter of business cond	olence lucted in Rhode Isl	State	Zip 02908	
DOI 690 838 B. Principal Office Address B. Principal Office Address B. NAICS Code DIB 990 B. State of Incorporation C. List ALL officers (names and accresident Name Charbe	2. Exact nar	ne of the Corpora	City Caty racter of business cond	lucted in Rhode Isl	land	02908	
OOI 690 838 3. Principal Office Address 3. 87 ATWE 1. NAICS Code 713 990 5. State of Incorporation 7. List ALL officers (names and accresident Name Charbe	6. Brief desc	AVE In	City Yrav; racter of business cond	lucted in Rhode Isl	land	02908	
3. Principal Office Address 3.87 ATWE 1. NAICS Code 7.13 990 5. State of Incorporation 7. List ALL officers (names and action of the property) 7. President Name Charbe	6. Brief desc	AVe cription of the cha	City Y V V i	lucted in Rhode Isl	land	02908	
5. State of Incorporation 7. List ALL officers (names and active content Name) Charbe	6. Brief desc	ungc	racter of business cond	lucted in Rhode Isl	land		
5. State of Incorporation 7. List ALL officers (names and acrossident Name Charbe)	Lo didresses)	ungc		Check ti			
7. List ALL officers (names and ac President Name Charbe	ddresses)		Vice-President Na		he box to indicat		
President Name Charbel	1 1	5055	Vice-President Na		he box to indicat		
President Name Charbel	1 1	(4:5)	Vice-President Na		he box to indicat		
	[PL 05	(チン) ニ		Check the box to indicate an attachment Vice-President Name			
			Street Address				
114 Paine	AVY						
crunston	State	Zip 029	1/2 City		State	Zip	
Secretary Name	1 (0 1)		Treasurer Name		<u> </u>		
Street Address			Street Address				
			100		Tour		
City	State	Ζιp	City		State	Zip	
B. List ALL directors (names and a	addresses)		······································	Check t	the box to indicat	te an attachment	
Director Name	Director Name						
Street Address			Street Address				
City	State	Zip	City		State	Zip	
Director Name			Disease No.				
Director Name			Director Name				
Street Address	Street Address	Street Address					
City	State	Zıp	City		State	Zip	
9. Shares Authorized		10. Shares				te an attachment 🗀	
This information is currently of rec Department of State.	ord in the	NUMB	R OF SHARES	CLASS/SERIES	- 1	PAR VALUE	
Changes require an additional filing.		<u> </u>	\sim				
11. This report must be executed	on behalf of th	e corporation by	an authorized represen	tative. If the corpo	ration is in the he	ands of a receiver of	
trustee, this report must be execu	ited on behalf o	of the corporation	by the receiver or trust	tee.			
Under penalty of perjury, I deci statements, and that all statem				uding any accom	npanying sched	ules and	

Churbel Mosseis:

FILED

JAN 0 8 2020 11:01

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.scs.ri.gov XTNGX