

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2020**
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 15 2020

7493

1. Entity ID Number 000106616		2. Exact name of the Corporation Brandy's Communications, Inc			
3. Principal Office Address 27 Vanstone Av			City Warwick	State RI	Zip 02889
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Installation, service and sales of audio/video systems and equipment, antennas, satellite and electronic equipment			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Herman Brandenburg			Vice-President Name Susan Brandenburg		
Street Address 27 Vanstone Av			Street Address 27 Vanstone Av		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889
Secretary Name			Treasurer Name		
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		
			100	STK	\$0.00
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 Susan Brandenburg					Date 1/10/2020
Signature of Authorized Representative 					