State	of Rhode Island and Pro Office of the Secreta		Fee: \$50.00						
Division Of Business Services									
148 W. River Street									
	Providence RI 02904-2615 (401) 222 3040								
(401) 222-3040									
Business Corporation									
Annual Report Filing Period: January 1 - March 1									
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501									
(c&d)) is subject to a penalty fee of \$25.00.									
ANNUAL REPORT YEAR: 2020									
1. Corporate ID No. 001677412									
2. Name of Corporation Summit Web Adventures, Inc.									
3. Street Address Principal Business Office:									
No. and Street: <u>48 RESE</u>	ERVOIR AVE								
City or Town: JOHNS		<u>RI</u> Zip: <u>02919</u> Country	r: <u>US</u>						
4. Business Phone No.									
<u>401-481-6578</u>									
5. State of Incorporation									
State: <u>RI</u>	State: <u>RI</u>								
	ARTICLE III								
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.									
<u>541613</u>									
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island							
MARKETING CONSULTING AND DESIGN SERVICES.									
7. Names and Addresses of th	e Officers and Directors:								
All officers and directors m	ust be listed. If officers and/	r directors have been elected th	he title						
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.									
Title	Individual Name	Address							
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code	, Country						
PRESIDENT	DARREN MICHAEL MARINELLI	48 RESERVOIR AVENU	E						
		JOHNSTON, RI 02919 UNI							

SUMMIT WEB ADVENTURES	DARREN MICHAEL MARINELLI	48 RESERVOIR AVE JOHNSTON, RI 02919 US

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$1.0000	1,000.00	0

## 9. 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.

**Signed this 31 Day of January, 2020 at 7:22:09 PM.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

## By DARREN MICHAEL MARINELLI

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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