



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
STAMPMAR 02 2020
STATE OF RHODE ISLAND

BY

273608

1. Entity ID Number 000043877		2. Exact name of the Corporation International Sourcing & Marketing, Ltd.			
3. Principal Office Address 940 Waterman Avenue			City East Providence	State RI	Zip 02914
4. NAICS Code 425110		6. Brief description of the character of business conducted in Rhode Island The import, marketing, sourcing and sale of manufactured goods.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Gregory L. Lucini			Vice-President Name None		
Street Address 940 Waterman Avenue			Street Address		
City East Providence	State RI	Zip 02914	City	State	Zip
Secretary Name Gregory L. Lucini			Treasurer Name Gregory L. Lucini		
Street Address 940 Waterman Avenue			Street Address 940 Waterman Avenue		
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Kenneth R. Palumbo			Director Name Gregory L. Lucini		
Street Address 940 Waterman Avenue			Street Address 940 Waterman Avenue		
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
Director Name None			Director Name None		
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
			200	Common	No 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 Gregory L. Lucini				Date 2/27/2020	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	