

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2020 APR -6 P 2:07

Annual Report for the year: 2019
Corporation

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

1. Entity ID Number <u>000055373</u>		2. Exact name of the Corporation <u>Fredette Fisheries Inc</u>	
3. Principal Office Address <u>12 Mautucket Rd</u>		City <u>South Kingstown</u>	State <u>RI</u>
		Zip <u>02879</u>	
4. NAICS Code <u>11</u>	5. Brief description of the character of business conducted in Rhode Island <u>Commercial Fishing</u>		
5. State of Incorporation <u>RI</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>Wayne Fredette</u>		Vice-President Name <u>Carleen Fredette</u>	
Street Address <u>12 Mautucket Rd</u>		Street Address <u>12 Mautucket Rd</u>	
City <u>South Kingstown</u>	State <u>RI</u>	City <u>South Kingstown</u>	State <u>RI</u>
Zip <u>02879</u>		Zip <u>02879</u>	
Secretary Name <u>Carleen Fredette</u>		Treasurer Name <u>Wayne Fredette</u>	
Street Address <u>12 Mautucket Rd</u>		Street Address <u>12 Mautucket Rd</u>	
City <u>South Kingstown</u>	State <u>RI</u>	City <u>South Kingstown</u>	State <u>RI</u>
Zip <u>02879</u>		Zip <u>02879</u>	
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	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized <u>1000</u>		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.		NUMBER OF SHARES <u>100</u>	CLASS/SERIES <u>1</u>
Changes require an additional filing.			
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 <u>Wayne Fredette</u>		Date <u>2 April 2020</u>	
Signature of Authorized Representative <u>Wayne Fredette</u>			

FILED

APR 06 2020