



State of Rhode Island  
Department of State - Business Services Division

**FILED**

Annual Report for the year: 2021  
Corporation

JAN 11 2021

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

BY 9050 OS

1. Entity ID Number 001676409		2. Exact name of the Corporation Geragos & Geragos <i>A Professional Corp</i>			
3. Principal Office Address 644 South Figueroa Street		City Los Angeles		State CA	Zip 90017
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island Practice of Law			
5. State of Incorporation CA					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Mark J. Geragos			Vice-President Name		
Street Address 644 South Figueroa Street			Street Address		
City Los Angeles	State CA	Zip 90017	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Mark J. Geragos			Director Name		
Street Address 644 Figueroa Street			Street Address		
City Los Angeles	State CA	Zip 90017	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1,000		CNP	\$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. <b>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.</b>					
Name of Authorized Representative Richard S. Humphrey				Date 1-6-21	
Signature of Authorized Representative 					

MAIL TO:  
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