RI SOS Filing Number: 202190494250 Date: 2/5/2021 4:00:00 PM

State of Rhode Island Department of S	State - Busine		Division		LED	5 0.7	
innual Report for the corporation	year: <u>2021</u>		_	FEB	0 5 2021	OV	
 → Filing period: January 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.0 		t filed by April 1.		ry3	<u>0ay</u>	3	
I. Entity ID Number		e of the Corporation	<u> </u>				
56457	li .	NEPTUNE TRADING GROUP, LTD.					
3. Principal Office Address			City	•	State	Zip	
130 Bellevue Avenue, Units 201-202			Newport		RI	02840	
1. NAICS Code 1. State of Incorporation Rhode Island	l l	•		nducted in Rhode Is		UCTS/BYPRODUCTS	
	t addresses)			Check	the box to in	dicate an attachment	
7. List ALL officers (names and addresses) President Name Brady Schofield			Vice-President Name				
Street Address 130 Bellevue Avenue, Units 201-202			Street Address				
City Newport	State RI	Zip 02840	City		State	Zip	
Secretary Name Brady Schofle	Hd		Treasurer Name	Brady Schofield	. I		
Street Address 130 Bellevue A	venue, Units 201-	202	Street Address	130 Bellevue Aver		01-202	
City Newport	State RI	^{Zip} 02840	City Newport		State RI	^{Zip} 02840	
8. List ALL directors (names a	nd addresses)			Check	the box to in	ndicate an attachment [
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	<u></u>	State	Zip	
9. Shares Authorized		10. Shares Is				ndicate an attachment [
his information is currently of record in the epartment of State.			OF SHARES	CLASS/SERIES Common		No Par	
Changes require an additional filing.		2000		Common No		190 Par	
11. This report must be execu	ited on behalf of the	e corporation by an	authorized repres	entative. If the corp	oration is in	the hands of a receiver	
trustee, this report must be ex Under penalty of perjury, I o	teclare and affirm	that I have exami	ned this report, ir	ustee. Including any acco	mpanying s	chedules and	
statements, and that all statements and that all statements and that all statements are statements.		o nerein are true a	na correct.		Date		
Brady Schoffeld			ــما	(606.60)			
Signature of Authorized Repri	esentative	SIGN DO	CUMENTHE	RE			

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov