



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2021**
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

MAR 01 2021

BY 1383

1. Entity ID Number 877711		2. Exact name of the Corporation CK Communications, Inc.			
3. Principal Office Address 5600 Post Road; Suite 114			City East Greenwich	State RI	Zip 02818
4. NAICS Code 511990 , an		6. Brief description of the character of business conducted in Rhode Island advertising and public relations business			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Eric Cote			Vice-President Name		
Street Address 5600 Post Road; Suite 114			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Secretary Name Eric Cote			Treasurer Name Eric Cote		
Street Address 5600 Post Road; Suite 114			Street Address 5600 Post Road; Suite 114		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
8. List ALL directors (names and addresses) Check the box to indicate 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	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			100	Common	No Par
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 Eric Cote				Date 2-22-21	
Signature of Authorized Representative 					
SIGN DOCUMENT HERE					

MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov