



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2021
Corporation

MAY 03 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 774

1. Entity ID Number 001704709		2. Exact name of the Corporation DASEC INC			
3. Principal Office Address 41 ALTON STREET			City PROVIDENCE	State RI	Zip 02908
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island GENERAL RESIDENTIAL RENOVATION			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name ALVARO CANALES			Vice-President Name CARLOS CANALES OSORIO		
Street Address 41 ALTON STREET			Street Address 41 ALTON STREET APT 1		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	Zip 02908
Secretary Name DIANA CANALES OSORIO			Treasurer Name ALVARO E. CANALES		
Street Address 41 ALTON STREET APT 1			Street Address 44 MAWNEY STREET APT 4		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	Zip 02907
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name SOILA A. OSORIO DE CANALES			Director Name		
Street Address 41 ALTON STREET APT 1			Street Address		
City PROVIDENCE	State RI	Zip 02908	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 <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
		1000	STK	0.01	
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. <i>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.</i>					
Name of Authorized Representative ALVARO CANALES				Date 04/24/2021	
Signature of Authorized Representative 					