



State of Rhode Island
 Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS SVCS DIV

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.

2021 MAY 27 AM 10:58

1. Entity ID Number 000110497		2. Exact name of the Corporation COMMETTE YACHT CONSULTANTS, INC.	
3. Principal Office Address 7 Maplewood Drive		City East Greenwich	State RI
		Zip 02818	
4. NAICS Code 999999	6. Brief description of the character of business conducted in Rhode Island Boat sales and maintenance		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Brian Commette		Vice-President Name Brian Commette	
Street Address 7 Maplewood Drive		Street Address 7 Maplewood Drive	
City East Greenwich	State RI	City East Greenwich	State RI
		Zip 02818	
Secretary Name Brian Commette		Treasurer Name Brian Commette	
Street Address 7 Maplewood Drive		Street Address 7 Maplewood Drive	
City East Greenwich	State RI	City East Greenwich	State RI
		Zip 02818	
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	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
		Zip	
9. Shares Authorized			
This information is currently of record in the Department of State.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		100	Common
			PAR VALUE
			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 Brian Commette		Date 5/26/2021	
Signature of Authorized Representative 			

FILED

11:00

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

MAY 27 2021
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