



State of Rhode Island

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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 JUN 10 AM 9:46

1. Entity ID Number 001699557			2. Exact name of the Corporation SecZetta, Inc.											
3. Principal Office Address 1082 Davol Street			City Fall River		State MA Zip 02720									
4. NAICS Code 541690		6. Brief description of the character of business conducted in Rhode Island Software and software services												
5. State of Incorporation DE														
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☒									
President Name			Vice-President Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Secretary Name			Treasurer Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
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											
This information is currently of record in the Department of State. Changes require an additional filing.			Check the box to indicate an attachment ☐											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>19,068,727</td> <td>Common</td> <td>\$0.00001</td> </tr> <tr> <td>12,321,440</td> <td>Preferred</td> <td>\$0.00001</td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	19,068,727	Common	\$0.00001	12,321,440	Preferred	\$0.00001
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19,068,727	Common	\$0.00001												
12,321,440	Preferred	\$0.00001												
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 Michael Needel					Date 6/7/21									
Signature of Authorized Representative														

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

FILED
JUN 24 2021
675RL
BY A.A.
FORM 630 - Revised 08/2020

2021

List of Officers

Title	Individual Name	Address
CEO	David Pignolet	50 Cedar Hill Drive, Jamestown RI 02835
VP of Finance	Michael Needel	1082 Davol Street, Fall River MA 02720
Treasurer	David Pignolet	50 Cedar Hill Drive, Jamestown RI 02835
Director	Jay Leek	11231 US Highway 1 #395, North Palm Beach FL 33408
Director	David Pignolet	50 Cedar Hill Drive, Jamestown RI 02835
Director	Zackary King	1082 Davol Street, Fall River MA 02720
Director	Arthur Coviello	301 Carlson Parkway, Suite 110, Minnetonka, MN 55305
Secretary	David Pignolet	50 Cedar Hill Drive, Jamestown RI 02835