



State of Rhode Island
Department of State - Business Services Division

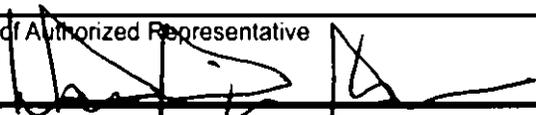
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Annual Report for the year: 2013
Corporation

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

2021 AUG 25 A 10:37

1. Entity ID Number 000109617		2. Exact name of the Corporation Kiwi Marine Services, LTD			
3. Principal Office Address 14 Regatta Way			City Portsmouth	State RI	Zip 02871
4. NAICS Code 811219		6. Brief description of the character of business conducted in Rhode Island To repair and refit power and sail boats Title 7-1.1			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Daniel Kerr			Vice-President Name		
Street Address 14 Regatta Way			Street Address		
City Portsmouth	State RI	Zip 02871	City	State	Zip
Secretary Name Matthew Kerr			Treasurer Name Matthew Kerr		
Street Address 14 Regatta Way			Street Address 14 Regatta Way		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI	Zip 02871
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Daniel Kerr			Director Name		
Street Address 14 Regatta Way			Street Address		
City Portsmouth	State RI	Zip 02871	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	
		1000		STK	
				PAR VALUE	
				\$0.0000	
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 Daniel Kerr				Date 8/23/21	
Signature of Authorized Representative 					

FILED m

AUG 25 2021

BY *TSJ/V4*
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