



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2020
Corporation

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

1. Entity ID Number 000051495		2. Exact name of the Corporation Photonic Marketing Corporation			
3. Principal Office Address 22 Ducarl Drive			City Lincoln	State RI	Zip 02865
4. NAICS Code 425110		6. Brief description of the character of business conducted in Rhode Island FIBER OPTIC PRODUCT MARKETING AND DISTRIBUTION			
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 Jeffrey Lin			Vice-President Name Jeffrey Lin		
Street Address 283 Littleton Road			Street Address 283 Littleton Road		
City Harvard	State MA	Zip 01451	City Harvard	State MA	Zip 01451
Secretary Name Jeffrey Lin			Treasurer Name Jeffrey Lin		
Street Address 283 Littleton Road			Street Address 283 Littleton Road		
City Harvard	State MA	Zip 01451	City Harvard	State MA	Zip 01451
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Jeffrey Lin			Director Name		
Street Address 283 Littleton Road			Street Address		
City Harvard	State MA	Zip 01451	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	Common	1.00
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 Jeffrey Lin				Date 10/22/2021	
Signature of Authorized Representative 				FILED 	