



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. ID No.** 001702242

**2. Exact Name of the Limited Liability Company** INTERNATIONAL CONSULTANCY GROUP INCORPORATED, LLC

**3. State of Formation**

State: RI

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541611

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

ICG-USA IS A FULL-SERVICE CONSULTING FIRM SPECIALIZING IN GLOBAL DISTRIBUTION OF CUTTING-EDGE PRODUCTS, SYNERGETIC BUSINESS REPRESENTATION, INNOVATIVE BUSINESS DEVELOPMENT PRACTICES AND ASSET BASED ECONOMIC DEVELOPMENT STRATEGIES.

ICG-USA IS A CHANGE AGENT AND AN INTERNATIONAL CONSULTANT OF INNOVATIVE MARKET DEVELOPMENT SERVICES FOCUSED ON BEST PRACTICES IN BUSINESS DEVELOPMENT, ECONOMIC DEVELOPMENT AND WEALTH CREATION IN EMERGING ECONOMIES.

**5. Principal Office Address**

No. and Street: 28 HOLLINS DR  
City or Town: CRANSTON State: RI Zip: 02920 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: Contact Title:  
No. and Street: 28 HOLLINS DR  
City or Town: CRANSTON State: RI Zip: 02920 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
MANAGER	SIMON GOUDIABY	28 HOLLINS DR CRANSTON, RI 02920 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

SIMON GOUDIABY 28 HOLLINS DR CRANSTON , RI 02920

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 15 Day of November, 2021 at 12:32:47 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By SIMONGOUDIABY  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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