State De RI SOS Filing Number: 202107219240 Date: 12/17/2021-1:00:00 PM

State of Rhode Island and Providence Plantations

**Department of State - Business Services Division** 

R.I. DEPT. OF STATE BUS SVCS DIV

Annual Report for the year: 2021

Corporation 2021 DEC 17 P 12: 59

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$2	5.00 fee if form is n	ot filed by April 1.				
1. Entity ID Number 000120804		2. Exact name of the Corporation  ELITE SYSTEMS MANAGEMENT, INC.				
3. Principal Office Address  164 SENECA AVE			City	State RI	Zip 02860	
4. NAICS Code 238210	2	6. Brief description of the character of business conducted in Rhode Island RENTAL OF SOUND, LIGHTING AND STAGING				
5. State of Incorporation RI						
7. List ALL officers (names a	nd addresses)	<del></del>		Check the box to indic	ate an attachment	
President Name ROMMEL MC	ONTES DE OCA		Vice-President Name			
Street Address PO BOX 27032			Street Address			
City PROVIDENCE	State RI	<sup>Zip</sup> 02907	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 indic	ate an attachment 🗖	
Director Name			Director Name	<del>-</del>		
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 NUMBER OF SHARES		Check the box to indicate an attachment	
This information is currently of record in the Department of State. Changes require an additional filing.		1000	FSHARES	CLASS/SERIES 0		
		-		-		
11. This report must be exect trustee, this report must be e	uted on behalf of the	corporation by an a	authorized representative. the receiver or trustee	If the corporation is in the	hands of a receiver or	
Under penalty of perjury, I statements, and that all sta	declare and affirm	that I have examin	ed this report, including	any accompanying sche	dules and	
Name of Authorized Represe		nerein are true ar	ia correct.	Date		
Rommel 1	Montes	de oc	2	12/	12/17/2021	
Signature of Authorized Repr	Montes resentative	nne HGN DE	CUCERT HERE	ILED		
<del></del>				C 1 7 2021		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov DEC 1 7 2021 BY 0540

FORM 630 - Revised: 10/2017