



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

- Filing period: February 1 - May 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

MAR 31 2023

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1. Entity ID Number 797616		2. Exact name of the Corporation TEEZER, INC.												
3. Principal Office Address 200 HILLTOP DRIVE			City PORTSMOUTH	State RI	Zip 02871									
4. NAICS Code 487210		6. Brief description of the character of business conducted in Rhode Island TO OPERATE A CHARTER FISHING BUSINESS												
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 ERIC G. THOMAS			Vice-President Name TARA A. THOMAS											
Street Address 200 HILLTOP DRIVE			Street Address 200 HILLTOP DRIVE											
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871									
Secretary Name ERIC G. THOMAS			Treasurer Name TARA A. THOMAS											
Street Address 200 HILLTOP			Street Address 200 HILLTOP											
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 N/A			Director Name N/A											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name N/A			Director Name N/A											
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.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>COMMON</td> <td>\$0.01</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	COMMON	\$0.01			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
100	COMMON	\$0.01												
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 ERIC G. THOMAS, PRESIDENT/SECRETARY					Date 3/25/2023									
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