



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.

STAMP

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R.I. DEPT. OF STATE
BUS SVCS DIV
FOR SECRETARY OF STATE
USE ONLY

2023 APR 18 P 12:22

1. Entity ID Number 001664864		2. Exact name of the Corporation Marine Interdiction Services, Inc.			
3. Principal Office Address 251 Franklin Street		City Bristol		State RI	Zip 02809
4. NAICS Code 333618		6. Brief description of the character of business conducted in Rhode Island Marines			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Julie C. Connett			Vice-President Name		
Street Address 251 Franklin Street			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Secretary Name Julie C. Connett			Treasurer Name Stephen M.H. Connett, Jr.		
Street Address 251 Franklin Street			Street Address 251 Franklin Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Julie C. Connett			Director Name		
Street Address 251 Franklin Street			Street Address		
City Bristol	State RI	Zip 02809	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		
			90 Common with 0.01 Par		
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 Julie C. Connett				Date 4/10/23	
Signature of Authorized Representative <i>Julie C. Connett</i>					

MAIL TO:
Division of Business Services
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Website: www.sos.ri.govFILED
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