



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.

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BUS. SVCS. DIV.

2023 MAY 31 AM 10:29

|  |             |   |   |             |                 |
|--|-------------|---|---|-------------|-----------------|
| 1. Entity ID Number<br>84036   |             | 2. Exact name of the Corporation<br>Eartec Company INC  |   |             |                 |
| 3. Principal Office Address<br>145 Dean Knauss Drive   |             | City<br>Narragansett  |   | State<br>RI | Zip<br>02882    |
| 4. NAICS Code<br>334220  |             | 6. Brief description of the character of business conducted in Rhode Island<br>Manufacture and distribution of communications systems |   |             |                 |
| 5. State of Incorporation<br>Rhode Island  |             |   |   |             |                 |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |             |   |   |             |                 |
| President Name John N. Hooper, Jr.   |             |   | Vice-President Name Paul A. Hooper  |             |                 |
| Street Address 145 Dean Knauss Drive   |             |   | Street Address 145 Dean Knauss Drive  |             |                 |
| City<br>Narragansett   | State<br>RI | Zip<br>02882  | City<br>Narragansett  | State<br>RI | Zip<br>02882    |
| Secretary Name Paul A. Hooper  |             |   | Treasurer Name Paul A. Hooper   |             |                 |
| Street Address 145 Dean Knauss Drive   |             |   | Street Address 145 Dean Knauss Drive  |             |                 |
| City<br>Narragansett   | State<br>RI | Zip<br>02882  | City<br>Narragansett  | State<br>RI | Zip<br>02882    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |             |   |   |             |                 |
| Director Name  |             |   | Director Name   |             |                 |
| 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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |             |                 |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |             |   | NUMBER OF SHARES  |             | CLASS/SERIES    |
|  |             |   | 200   |             | Common          |
|  |             |   | none  |             | no par value    |
|  |             |   | none  |             | none            |
| 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.<br><i>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.</i> |             |   |   |             |                 |
| Name of Authorized Representative<br>Paul A. Hooper  |             |   |   |             | Date<br>4/22/23 |
| Signature of Authorized Representative<br>   |             |   |   |             |                 |

FILED

MAY 31 2023

BY ML

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MAIL TO:  
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148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
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