	0 4 4 6 5		•	F #50.00
	State of F Office of the S	Rhode Islar Secretary o		Fee: \$50.00
	Division Of B	•		
		River Street		
1636		RI 02904-26 222-3040	515	
	· · · ·	222-3040		
Foreign Business Corpo Annual Report	ration			
Filing Period: February 1 - M	ay 1			
In accordance with R.I.G.L. T file its annual report within th (R.I.G.L. 7-1.2-1501(c&d)) is	nirty (30) days after the	time prescril)
ANNUAL REPORT YEAR -	INTER THE <u>CURRENT</u> F	ILING YEAR	2023 : <u>2023</u>	
1. Corporate ID No. <u>001</u>	<u>665653</u>			
2. Name of Corporation Lo	w Cost Interlock, Inc.			
3. Street Address Principa	Business Office:			
No. and Street: 2038	W PARK AVE			
City or Town: <u>REDI</u>	<u>ANDS</u>	State: <u>CA</u>	Zip: <u>92373</u>	Country: <u>USA</u>
4. Business Phone No.				
5. State of Incorporation				
State: <u>NV</u>				
	NAICS	CODE		
Enter the six digit NAICS Co Download the list of codes <u>t</u>				
<u>518210</u>				
6. Brief Description of the	Character of Business	Conducted i	n Rhode Island	I
MANUFACTURER OF A	UTOMATED SYSTE	EMS		
7. Names and Addresses o	f the Officers and Dire	ectors:		
All officers and director	s must be listed.			
Title	Individual Nam First, Middle, Last, Su	-		dress State, Zip Code, Country
P				

PRESIDENT	AARON HAND		2038 W PARK AVE REDLANDS, CA 92373 USA		
TREASURER	AARON HAND	AARON HAND		2038 W PARK AVE REDLANDS, CA 92373 USA	
SECRETARY	AARON HAND	<u>_</u>	2038 W PARK AVE REDLANDS, CA 92373 USA		
Shares Authorized and	Issued				
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares	
CWP		\$0.0010	10,000,000.00	1000000	
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-	e hands of a receiver ne receiver or trustee. agust, 2023 at 7:05:30 instrument constitutes of perjury, that this in on, and that the facts sta	or trustee, this rep 0 AM. This electro the affirmation of strument is that in ated herein are tru	port must be execut ponic signature of the r acknowledgement dividual's act and de	ted on behal e individual of the eed or the ac	
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