



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023  
Incorporation

→ 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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R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 DEC 14 A 8:45

Entity ID Number <u>000096083</u>	2. Exact name of the Corporation <u>EIS Wire &amp; Cable, Inc.</u>		
Principal Office Address <u>775 NEW LUDLOW Rd</u>	City <u>S. HADLEY</u>	State <u>MA</u>	Zip <u>01075</u>
NAICS Code <u>339999</u>	6. Brief description of the character of business conducted in Rhode Island <u>Investment and Advising Services</u>		
State of Incorporation <u>RI</u>			

List ALL officers (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>NICHOLAS MODERI</u>				Vice-President Name <u>ROY ST. ANDRE</u>			
Street Address <u>250B CENTERVILLE Rd</u>				Street Address <u>775 NEW LUDLOW RD</u>			
City <u>WARWICK</u>	State <u>RI</u>	Zip <u>02806</u>		City <u>S. HADLEY</u>	State <u>MA</u>	Zip <u>01075</u>	
Secretary Name <u>DAVID DEPETRILLO</u>				Treasurer Name <u>LISA GRARD</u>			
Street Address <u>250B CENTERVILLE Rd</u>				Street Address <u>775 NEW LUDLOW RD</u>			
City <u>WARWICK</u>	State <u>RI</u>	Zip <u>02806</u>		City <u>S. HADLEY</u>	State <u>MA</u>	Zip <u>01075</u>	

List ALL directors (names and addresses)						Check the box to indicate an attachment <input type="checkbox"/>					
Director Name						Director Name					
Street Address						Street Address					
City	State	Zip		City	State	Zip		City	State	Zip	
Director Name						Director Name					
Street Address						Street Address					
City	State	Zip		City	State	Zip		City	State	Zip	

9. Shares Authorized <u>2,112,100</u>	10. Shares Issued <u>1,112,100</u>			Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
Changes require an additional filing.			<u>21000.000</u>	<u>CNP</u>	<u>0.00</u>	

1. 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.

Signature of Authorized Representative  
LISA GRARD

Signature of Authorized Representative  
LISA GRARD

DATE  
DEC 14 2023

BY  
TRYLE

Date  
12/12/23

8:40