

State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Foreign Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2024**: 2024

1. Corporate ID No. 001662848

2. Name of Corporation PoliSeek AIS Insurance Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 17785 CENTER COURT DRIVE, SUITE 400

SUITE 400

City or Town: <u>CERRITOS</u> State: <u>CA</u> Zip: <u>90703</u>Country: <u>USA</u>

4. Business Phone No.

562-345-6151

5. State of Incorporation

State: IL

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here</u>. More information on <u>NAICS</u> can be found online.

524210

6. Brief Description of the Character of Business Conducted in Rhode Island

INSURANCE AGENCY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	MARK ALLAN RIBISI	SUITE 400 17785 CENTER COURT DR CERRITOS, CA 90703 USA	
TREASURER	THEODORE STALICK	4484 WILSHIRE BLVD LOS ANGELES, CA 90010 USA	
SECRETARY	JUDITH WALTERS	4484 WILSHIRE BLVD 3RD FL LOS ANGELES, CA 90010 USA	
VICE PRESIDENT	LANI ELKIN	17785 CENTER COURT DR #250 CERRITOS, CA 90703 USA	
DIRECTOR	GABRIEL TIRADOR	1700 GREEN BRIAR BREA, CA 92821 USA	
DIRECTOR	MARK ALLAN RIBISI	SUITE 100 16969 VON KARMAN AVE IRVINE, CA 92606 USA	
DIRECTOR	THEODORE STALICK	4484 WILSHIRE BLVD LOS ANGELES, CA 90010 USA	

8. Shares Authorized and Issued

				Total Issued
Class of Stock	Series of Stock	Par Value Per		and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	1,000.00	1000

9. 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.

Signed this 28 Day of April, 2024 at 3:45:06 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By JUDITH WALTERS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07