RI SOS Filing Number: 202453666310 Date: 5/1/2024 5:01:00 PM



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. <u>001679694</u>
- 2. Name of Corporation BMI North America, Inc.
- 3. Street Address Principal Business Office:

No. and Street: <u>5500 NORDIC PLACE</u>

City or Town: FERNDALE State: WA Zip: 98248 Country: USA

4. Business Phone No.

5. State of Incorporation

State: WA

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.

551114

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

PROVIDE STAFFING IN VARIOUS OPERATING CORPORATIONS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title | Individual Name | Address | | |
|-------|-----------------------------|---|--|--|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country | | |

| CFO | SUSAN PITTS | 5500 NORDIC PLACE FERNDALE, WA 98248 USA | |
|-----------|---------------------|---|--|
| | | T ETATEMENT TO COME | |
| SECRETARY | TINA M. JEFFCOAT | 5500 NORDIC PLACE | |
| | | FERNDALE, WA 98248 USA | |
| DIRECTOR | TINA M. JEFFCOAT | 5500 NORDIC PLACE | |
| | | FERNDALE, WA 98248 USA | |
| | | TERRODALE, WA 30240 GOA | |
| PRESIDENT | KEVIN THOMPSON | 2014 DENNIS STREET | |
| | | JACKSONVILLE, FL 32204 USA | |
| DIRECTOR | KEVIN THOMPSON | 2014 DENNIS STREET | |
| | | JACKSONVILLE, FL 32204 USA | |
| DIRECTOR | BRIAN SCHAEFGEN | 610 NEWPORT CENTER DRIVE STE 490 | |
| | | | |
| | | NEWPORT BEACH, CA 92660 USA | |
| DIRECTOR | JOSEPH J. UEBERROTH | 610 NEWPORT CENTER DRIVE, SUITE 490 | |
| | | NEWPORT BEACH, CA 92660 USA | |
| - | • | | |

8. 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 | | \$1.0000 | 100.00 | 100 |

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 1 Day of May, 2024 at 5:02:44 PM. 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 TINA M. JEFFCOAT

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07