No Fee

State of Rhode Island
Office of the Secretary of State

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

Business Corporation
Annual Report - Amended

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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2025

1. Corporate ID No. 000124434

2. Name of Corporation inQuery Inc.

3. Street Address Principal Business Office:

No. and Street: 1643 WARWICK AVENUE
#314
City or Town: WARWICK State: RI Zip: 02889 Country: USA

4. Business Phone No.

4015698199

5. State of Incorporation

State: RI

NAICS CODE

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

541618

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

INFORMATION TECHNOLOGY CONSULTING

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the

title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
VICE PRESIDENT	GABRIEL A MATTESON	7 FEN WAY COVENTRY, RI 02816 USA
DIRECTOR	GABRIEL A MATTESON	7 FEN WAY COVENTRY, RI 02816 USA
TREASURER	GABRIEL A MATTESON	7 FEN WAY COVENTRY, RI 02816 USA
SECRETARY	GABRIEL A MATTESON	7 FEN WAY COVENTRY, RI 02816 USA
PRESIDENT	GABRIEL A MATTESON	7 FEN WAY COVENTRY, RI 02816 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*
CNP		$0.0000	4,000.00	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 24 Day of June, 2025 at 2:58:05 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 GABRIEL A. MATTESON
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

June 24, 2025 02:57 PM

Gregg M. Amore
Secretary of State