

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 · This report must be typed or printed legibly. Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE. Buch 1. Entity ID No. 2. Exact name of the Corporation Ronald W. Del Sesto Law Corporation 52796 3. Principal office address State 49 Weybosset Street 02903 **Providence** RI 4. Business Phone No. 5. State of Incorporation 401-421-1492 Rhode Island 6. Brief description of the character of business conducted in Rhode Island Legal services. 7. LIST <u>ALL</u> OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) President Name Vice-President Name Ronald W. Del Sesto Street Address Street Address 49 Weybosset Street State City State Zip **Providence** 02903 RI Secretary Name Treasurer Name سهال يا Ronald W. Del Sesto Ronald W. Del Sesto Street Address Street Address 49 Weybosset Street **49 Weybosset Street** City State City State Zip Providence RI 02903 Providence 02903 RI 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) **Director Name** Director Name Street Address Street Address City State Zip City State Zip **Director Name** Director Name Street Address Street Address City State Zip City State Zip 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) NUMBER OF SHARES CLASS/SERIES PAR VALUE This information is currently of record in the Office of the Secretary 100 of State. Changes require an additional filing. Common None See Section 9 of instruction sheet. 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

File Date	EUED	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.			
By:	JAN 3 1 2014	RtDel Sesto Signature of Authorized Representative	1/3	Date	14
FOR SECRETARY OF STATE USE ONLY	9459	Ronald W. Del Sesto, President	•		
Form No. 630		Print or Type Name of Authorized Representative			

Form No. 630 Revised: 01/2012