State of New Hampshire
2013 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 293-A:16.22.
REPORT DUE BY April 1, 2013
ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 01/10/2013
Business ID: 158866
William M. Gardner
Secretary of State

INEL INC.

36 HEMLOCK CT
NEWFIELDS, NH 03856

ENTITY TYPE: CORPORATION
BUSINESS ID: 158866
STATE OF DOMICILE: DELAWARE

SELL SCIENTIFIC X-RAY EQUIPMENT IMPORTED FROM FRANCE

1

ADDRESS OF PRINCIPAL OFFICE:
36 HEMLOCK CT
NEWFIELDS, NH 03856

REGISTERED AGENT AND OFFICE:
STOLLSTORFF, GREGORY
36 HEMLOCK CT
NEWFIELDS, NH 03856

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If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐ The new mailing address

☐ The new principal office address

PO Box is acceptable.

3

OFFICERS
NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)
A

PRES. **Michel Hugnot**
STREET **36 Hemlock Ct**
CITY/STATE/ZIP **Newfields Nh 03856**
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

BOARD OF DIRECTORS
NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)
B

DIR. **Michel Hugnot**
STREET **36 Hemlock Ct**
CITY/STATE/ZIP **Newfields Nh 03856**
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

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To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: **Greg Stollstorff**

Please print name and title of signer: **Greg Stollstorff** / **AUTHORIZED PARTY**
NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

015886620131001

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE
RETURN COMPLETED REPORT AND PAYMENT TO:
New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301