State of New Hampshire
2015 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, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 03/05/2015
Business ID: 183402
William M. Gardner
Secretary of State

ALEN INVESTMENTS, INC.

15 DARTMOUTH DR STE 203
AUBURN, NH 03032

ENTITY TYPE: CORPORATION
BUSINESS ID: 183402
STATE OF DOMICILE: NEW HAMPSHIRE

TO BUY AND SELL COMMODITIES.

1

ADDRESS OF PRINCIPAL OFFICE:
15 DARTMOUTH DR STE 203
AUBURN, NH 03032

REGISTERED AGENT AND OFFICE:
MALONEY, RICHARD J, CPA
15 DARTMOUTH DRIVE S203
AUBURN, NH 03032

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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.

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OFFICERS — **A**

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

PRES. Dmitriy Vasyuk
STREET 15 Dartmouth Drive Suite 203
CITY/STATE/ZIP Auburn Nh 03032
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

BOARD OF DIRECTORS — **B**

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

DIR. Dmitriy Vasyuk
STREET 15 Dartmouth Drive Suite 203
CITY/STATE/ZIP Auburn Nh 03032
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: Dmitriy Vasyuk

Please print name and title of signer: Dmitriy Vasyuk / PRESIDENT
NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

018340220151007

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