	State of Rhode	Island	Fee: \$50.00			
	Office of the Secreta	•				
	Division Of Busines 148 W. River S					
	Providence RI 029					
7636	(401) 222-30	40				
Foreign Business Corpora Annual Report	tion					
Filing Period: February 1 - May	1					
In accordance with R.I.G.L. 7-1						
file its annual report within thirt (R.I.G.L. 7-1.2-1501(c&d)) is su						
ANNUAL REPORT YEAR - EN	FER THE CURRENT YEAR 2	024 : <u>2024</u>				
1. Corporate ID No. 00168	0537					
2. Name of Corporation LIFT	<u>`& CARE SYSTEMS INC</u>	ORPORATED				
3. Street Address Principal B	usiness Office:					
No. and Street: <u>7 PRECIN</u>	<u>CT STREET</u>					
City or Town: <u>LAKEVIL</u>	LE State: MA	Zip: <u>02347-1427</u>	Country: <u>USA</u>			
4. Business Phone No.						
<u>508-947-3304</u>						
5. State of Incorporation						
State: <u>MA</u>						
NAICS CODE						
Enter the six digit NAICS Code Download the list of codes <u>her</u>	-					
<u>454390</u>						
6. Brief Description of the Ch	aracter of Business Conduc	cted in Rhode Island				
SALES SERVICE AND INS	TALLATION OF DISABI	LITY MEDICAL EQU	JIPMENT			
7. Names and Addresses of t	he Officers and Directors:					
All officers and directors n	ust be listed.					
Title	Individual Name First, Middle, Last, Suffix	Address, City or Town, Sta				
Ľ						

PRESIDENT	DAVID N. AUSTI	DAVID N. AUSTIN		7 PRECINCT STREET, #4 LAKEVILLE, MA 02347 USA	
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	

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 January, 2024 at 5:35:42 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 DAVID N. AUSTIN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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