



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

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

[LOGOUT](#)

**Business Corporation
Annual Report**

Filing Period: January 1 - March 1



Help with this form

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.

ANNUAL REPORT YEAR: <input type="text" value="2010"/>			
1. Corporate ID No. <input type="text" value="000156816"/>			
2. Name of Corporation <input type="text" value="PAINTING CONCEPTS OF WARWICK CO. INC"/>			
3. Street Address Principal Business Office:			
No. and Street:	<input type="text" value="189 SANDY LANE"/>		
City or Town:	<input type="text" value="WARWICK"/>	State: <input type="text" value="RI"/>	Zip: <input type="text" value="02889"/>
		Country: <input type="text" value="USA"/>	
4. Business Phone No.			
<input type="text" value="401-737-0080"/>			
5. State of Incorporation			
State: <input type="text" value="RI"/>			
6. Brief Description of the Character of Business Conducted in Rhode Island			
<input type="text" value="INTERIOR PAINTING"/>			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.			

FILED

FEB 17 2010

By 1095

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	SECRETARY	RICKY WILLIAM BERNARD KING	189 SANDY LANE WARWICK, RI 02889 USA
<input type="checkbox"/>	PRESIDENT	WILLIAM R BERNARD SR.	189 SANDY LANE WARWICK, RI 02889- USA
<input type="checkbox"/>	VICE PRESIDENT	DENNIS WILLIAM BERNARD	189 SANDY LANR WARWICK, RI 02889 USA

Select From Below Title:

First Name: Middle Name: Last Name: Suffix:

Address: City: State: Zip: Country:

Clear Add

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
STK		\$0.00	500.00	500.00

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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name:

Business Name:

No. and Street:

- Same Address as -

City or Town: State: Zip: Country:

Contact Phone: ext:

Contact Email: Clear

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 14 Day of February, 2010 at 1:00:05 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.

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FEB 17 2010

By 156816

By William R. Bernier SR
Signature of Authorized Representative of the Corporation

PRESIDENT
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this

Accept Decline

[Click HERE to Submit This Information](#)

Form No. 630
Revised 09/07

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FEB 17 2010

By 156816