



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 2015

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.

1. Entity ID No. 506380		2. Exact name of the Corporation Eileen Enterprises, Inc		
3. Principal office address 40 Steeple Lane		City Lincoln	State R.I.	Zip 02865
4. Business Phone No. 401-578-3179		5. State of Incorporation R.I.		
6. Brief description of the character of business conducted in Rhode Island Title 7-1.2-1701 Odor Control and Hygiene and sale of related products				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐				
President Name PAUL A. CACCIA		Vice-President Name Eileen R. CACCIA		
Street Address 40 Steeple Lane		Street Address 40 Steeple Lane		
City Lincoln	State R.I.	Zip 02865	City Lincoln	State R.I.
Secretary Name Eileen R. CACCIA		Treasurer Name PAUL A. CACCIA		
Street Address 40 Steeple Lane		Street Address 40 Steeple Lane		
City Lincoln	State R.I.	Zip 02865	City Lincoln	State R.I.
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐				
Director Name PAUL A. CACCIA		Director Name Eileen R. CACCIA		
Street Address 40 Steeple Lane		Street Address 40 Steeple Lane		
City Lincoln	State R.I.	Zip 02865	City Lincoln	State R.I.
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐				
NUMBER OF SHARES 100		CLASS/SERIES C		PAR VALUE .05

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
Check No
By
FOR SECRETARY OF STATE USE ONLY

FILED

FEB 05 2015

CH 241651

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.

Paul A Caccia **2-5-15**
Signature of Authorized Representative Date

Print or Type Name of Authorized Representative