

RI SOS Filing Number: 201734810330 Date: 2/23/2017 4:00:00 PM

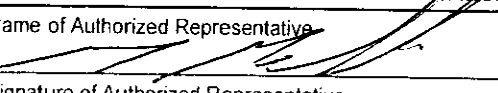
State of Rhode Island and Providence Plantations  
Department of - Business Services Division

## Annual Report for the Corporation .. 2017

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 000544122		2. Exact name of the Corporation MIKE'S CLEANING COMPANY INC			
3. Principal Office Address P.O. BOX 6976			City WARWICK	State RI	Zip 02887
4. Business Phone Number 401-345-2357			5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island JANITORIAL SERVICES					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment</span>					
President Name MACIEJ MALINOWSKI			Vice-President Name		
Street Address P.O. BX 6976			Street Address		
City WARWICK	State RI	Zip 02887	City	State	Zip
Secretary Name MACIEJ MALINOWSKI			Treasurer Name MACIEJ MALINOWSKI		
Street Address P.O. BX 6976			Street Address P.O. BX 6976		
City WARWICK	State RI	Zip 02887	City WARWICK	State RI	Zip 02887
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment</span>					
Director Name MACIEJ MALINOWSKI			Director Name		
Street Address P.O. BX 6976			Street Address		
City WARWICK	State RI	Zip 02887	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment</span>		
			NUMBER OF SHARES 100	CLASS/SERIES COMMON	PAR VALUE
11. 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.					
<b>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.</b>					
Name of Authorized Representative 				Date 1/24/17	
Signature of Authorized Representative MACIEJ MALINOWSKI					

FILED

FEB 23 2017

BY

3602 DS

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov