



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

FILED

FEB 01 2018

BY

17873

ANNUAL REPORT FOR THE YEAR 2018

Corporation

- Filing Period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1

1 Corporate ID No 000061942		2 Name of Corporation R.I. Kitchen & Bath, Inc.			
3 Street Address Principal Business Office 139 Jefferson Blvd.		City Warwick	State RI	Zip 02888	
4 NAICS Code 234116		5 State of Incorporation Rhode Island			
6 Brief Description of the Character of Business Conducted in Rhode Island Construction and remodeling, sales and installation of kitchen and bath related products					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Tanya M. Donahue			Vice President Name		
Street Address 139 Jefferson Blvd.			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name Steven L. St. Onge			Treasurer Name Steven L. St. Onge		
Street Address 139 Jefferson Blvd.			Street Address 139 Jefferson Blvd.		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Steven L. St. Onge			Director Name		
Street Address 139 Jefferson Blvd.			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) ☐			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES - THIS SECTION MUST BE COMPLETED		
			Number of Shares 157.9 shares common stock of no par value	Class Series	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.

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.

Signature

Print or Type Name

President

Title

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos RI.gov