

Department of State - Business Services Division

for the year: **2018**

FILED

APR 23 2018

BY 0272/0250

- 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 001674484		2. Exact name of the Corporation NY Pizza, Inc.			
3. Principal Office Address 224 Post Road			City Westerly	State RI	Zip 02891
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island To own and operate a full service restaurant.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Tyler Carlson			Vice-President Name Mark Lacz		
Street Address 163 Ledgewood Road			Street Address 57 Tower Street		
City Groton	State CT	Zip 06340	City Westerly	State RI	Zip 02891
Secretary Name Michael Lacz			Treasurer Name Tyler Carlson		
Street Address 57 Tower Street			Street Address 163 Ledgewood Road		
City Westerly	State RI	Zip 02891	City Groton	State CT	Zip 06340
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Tyler Carlson			Director Name Mark Lacz		
Street Address 163 Ledgewood Road			Street Address 57 Tower Street		
City Groton	State CT	Zip 06340	City Westerly	State RI	Zip 02891
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			PAR VALUE		
			1000	Common	None
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.					
Name of Authorized Representative Tyler Carlson, President					Date 3/10/18
Signature of Authorized Representative 					