



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

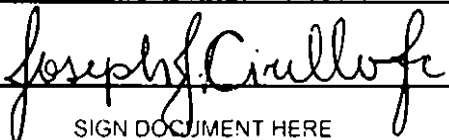
Annual Report for the year: 2018
Corporation

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

FILED

DEC 20 2018

BY 480
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1. Entity ID Number 001678451		2. Exact name of the Corporation CIRELLO AND ASSOCIATES ACCOUNTING INC.			
3. Principal Office Address 5 EVANGELINE CT		City BRISTOL		State RI	Zip 02809
4. NAICS Code 541219	6. Brief description of the character of business conducted in Rhode Island BOOKKEEPING				
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name JOSEPH JAMES CIRELLO JR		Vice-President Name none			
Street Address 5 EVANGELINE CT		Street Address			
City BRISTOL	State RI	Zip 02809	City	State	Zip
Secretary Name none		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name none		Director Name none			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment ☐					
This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment ☐			
		NUMBER OF SHARES		CLASS-SERIES	
		PAR VALUE			
		100	ORDINARY SHARES		1.00
		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 JOSEPH JAMES CIRELLO JR.				Date 12/19/2018	
Signature of Authorized Representative  SIGN DOCUMENT HERE					