RI SOS Filing Number: 201883198910 Date: 12/24/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019

27. ...2

| Corporation | Co | rp | 10 | at | io | n |
|-------------|----|----|----|----|----|---|
|-------------|----|----|----|----|----|---|

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

| Entity ID Number | | 2. Exact name of the Corporation | | | | | | | | |
|--|----------------|----------------------------------|---|-------------------------------------|-----------------|----------------------------|--|--|--|--|
| 6280 | | R. DAVIS LTI | | | | | | | | |
| Principal Office Address | <u>=</u> | | City | | State | Zip | | | | |
| P.O. BOX 1424 | | | WOONSOO | CKET | RI | 02895 | | | | |
| 4. NAICS Code | | • | cter of business | conducted in Rhode | e Island | L | | | | |
| 339999 | MANUFACT | MANUFACTURING & SALES | | | | | | | | |
| 5. State of Incorporation | | | | | | | | | | |
| RHODE ISLAND | | | | | | | | | | |
| 7 List ALL officers (names an | d addresses) | | | Che | ck the box to i | ndicate an attachment | | | | |
| President Name GERARD R. D | AVIS, JR | | Vice-President Name GERARD R. DAVIS, JR | | | | | | | |
| Street Address 521 PROVIDEN | ICE PIKE | | Street Address 521 PROVIDENCE PIKE | | | | | | | |
| City NO. SMITHFIELD | State RI | ^{Zıp} 02896 | City NO SM | IITHFIELD | State RI | ^{Zip} 02896 | | | | |
| Secretary Name GERARD R. DAVIS, JR. | | | Treasurer Na | Treasurer Name GERARD R. DAVIS, JR. | | | | | | |
| Street Address 521 PROVIDENCE PIKE | | | Street Addres | Street Address 521 PROVIDENCE PIKE | | | | | | |
| City NO. SMITHFIELD | State RI | ^{Zip} 02896 | City NO SMITHFIELD | | State RI | ^{Zıp} 02896 | | | | |
| 8. List ALL directors (names a | ind addresses) | | | Che | ck the box to i | ndicate an attachment | | | | |
| Director Name GERARD R. DAVIS, LTD | | | Director Nam | Director Name NONE | | | | | | |
| Street Address 521 PROVIDENCE PIKE | | | Street Addres | Street Address | | | | | | |
| City NO SMITHFIELD | State RI | ^{Z_ip} 02896 | City | | State | Zip | | | | |
| Director Name NONE | | | Director Name NONE | | | | | | | |
| Street Add:ess | | | Street Address | | | | | | | |
| City | State | Zıp | City | | State | Žip | | | | |
| 9. Shares Authorized | | | | | | | | | | |
| This information is currently of record in the Department of State. | | | NUMBER OF SHARES | | COMMON \$1.00 | | | | | |
| | | 1000 | | | | \$1.00 | | | | |
| Changes require an additional | filing. | | | | - - | | | | | |
| 11. This report must be executrustee, this report must be ex | | | | | rporation is in | the hands of a receiver or | | | | |
| Under penalty of perjury, I de | | | | | ompanying s | chedules and | | | | |
| statements, and that all statements contained herein are true and correct. | | | | | | | | | | |
| Name of Authorized Representative GERARD R. DAVIS, JR | | | | | | Date 12 - 20 - 20/8 | | | | |
| | | | | | | | | | | |
| Signature of Authorized Repre | esentative | 50 57: 1)(. | OCUME OF SHAP | il Fia | | | | | | |
| | | | | [| | | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov. DEC 24 2018 VZ 10379