



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2019**
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. Entity ID Number 315936		2. Exact name of the Corporation BREEZY, INC.			
3. Principal Office Address 24 BERM DRIVE			City CUMBERLAND	State RI	Zip 02864
4. NAICS Code 531390	6. Brief description of the character of business conducted in Rhode Island SALE OF REAL ESTATE AND ANY OTHER LAWFUL BUSINESS ACTIVITY				
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name THOMAS J. PIANTADOSI			Vice-President Name THOMAS J. PIANTADOSI		
Street Address 24 BERM DRIVE			Street Address 24 BERM DRIVE		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
Secretary Name THOMAS J. PIANTADOSI			Treasurer Name THOMAS J. PIANTADOSI		
Street Address 24 BERM DRIVE			Street Address 24 BERM DRIVE		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
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		10. Shares Issued Check the box to indicate an attachment ☐			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100	COMMON	NO PAR	
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 THOMAS J. PIANTADOSI				Date ✓ 1-24-19	
Signature of Authorized Representative 					

JAN 28 2019

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