



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 000789850		2. Exact name of the Corporation RUBY'S CLEANING & PAINTING, INC.												
3. Principal Office Address 35 Dakota Street			City Providence	State RI	Zip 02904									
4. NAICS Code 561720		6. Brief description of the character of business conducted in Rhode Island Residential and Commercial Janitor Services and Interior and Exterior Painting												
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 Edgar B. Perez			Vice-President Name None											
Street Address 35 Dakota Street			Street Address											
City Providence	State RI	Zip 02904	City	State RI	Zip									
Secretary Name None			Treasurer Name None											
Street Address			Street Address											
City	State RI	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized 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 <input type="checkbox"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>STK</td> <td>0.0100</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1.00	STK	0.0100			
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1.00	STK	0.0100												
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 Edgar B. Perez				Date 01/24/2019										
Signature of Authorized Representative * [Signature]														

FILED**FEB 01 2019****10364**

MAIL TO:

Division of Business Services

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