RI SOS Filing Number: 201986235260 Date: 2/8/2019 4:00:00 PM

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Section 1

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 no	ot filed by April 1.						
Entity ID Number	2. Exact nam	2. Exact name of the Corporation						
1018613	Chatham	Chatham Industries, Inc.						
3. Principal Office Address			City		State	Zip		
106 High Street			Cumberlan	berland		02864		
4. NAICS Code	6. Brief descr	6. Brief description of the character of business conducted in Rhode Island						
561720	Providing p	Providing professional cleaning and janitorial services.						
5. State of Incorporation								
Rhode Island			•			!		
7. List ALL officers (names ar	d addresses)				he box to ir	ndicate an attachment 🗖		
President Name Jeffrey S. Bro	Vice-President Name None							
Street Address 106 High Street	Street Address							
City Cumberland	State RI	^{Zip} 02864	City		State	Zip		
Secretary Name Jeffrey S. Brown			Treasurer Name Jeffrey S. Brown					
Street Address 106 High Street			Street Address 106 High Street					
City Cumberland	State RI	^{Zip} 02864	City Cumberland		State RI	^{Zip} 02864		
8. List ALL directors (names a	and addresses)				the box to i	ndicate an attachment 🔲		
Director Name Jeffrey S. Brown			Director Name					
Street Address 106 High Street			Street Address					
Cumberland	State RI	Zip 02864	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City		State	Zip		
Shares Authorized 10. Shares Iss		ued 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			
		8,908.25	8,908.25		Common No p			
11. This report must be executrustee, this report must be ex					ration is in t	the hands of a receiver or		
Under penalty of perjury, I on statements, and that all sta				ncluding any accom	panying s	chedules and		
Name of Authorized Represe					Date /	/		
Jeffrey S. Brown, Presiden	t				2/4	1/2019		
Signature of Authorized Repr	esentative	61/200	city/wit			•		
My Zo	re	"Y'rea	cident-	FILED				
MAII TO		/		• • • • • • • • • • • • • • • • • • • •		•		

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FEB 08 2019

FORM 630 - Revised: 10/2017