



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.

FILED

FEB 11 2019

BY

1986485250

laoh

1. Entity ID Number 000104293		2. Exact name of the Corporation Cook's Overhead Doors, Inc.			
3. Principal Office Address 206 Gooding Avenue			City Bristol	State RI	Zip 02809
4. NAICS Code 212321		6. Brief description of the character of business conducted in Rhode Island To engage in the business of installing and repairing overhead garage doors; to perform general repairs and construction of residential and commercial property			
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 Christopher Cook			Vice-President Name Christopher Cook		
Street Address 8 Highland Road			Street Address 8 Highland Road		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Christopher Cook			Treasurer Name Christopher Cook		
Street Address 8 Highland Road			Street Address 8 Highland Road		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Christopher Cook			Director Name NONE		
Street Address 8 Highland Road			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
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 Christopher Cook					Date 2/4/19
Signature of Authorized Representative <i>[Signature]</i>					SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov