RI SOS Filing Number: 201987059360 Date: 2/19/2019 4:00:00 PM

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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.

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Entity ID Number		2. Exact name of the Corporation						
106423	Ace Electric, Inc							
3. Principal Office Address			City		State	Zıp		
498 Broadway			Providence		RI	02909		
4. NAICS Code	6. Brief desc	Brief description of the character of business conducted in Rhode Island						
238210	Electrical	Electrical Installation						
5. State of Incorporation		7						
RI								
7. List ALL officers (names a	nd addresses)		.		he box to	ndicate an attachment 🔲		
President Name Mr. John Vendetti			Vice-President Name					
Street Address 498 Broadway			Street Address					
City Providence	State RI	^{Zip} 02909	City		State	Zip		
Secretary Name			Treasurer Name	Treasurer Name				
Street Address			Street Address					
City	State	Zıp	City		State	Zıp		
8. List ALL directors (names	and addresses)			Check t	he box to	indicate an attachment		
Director Name Mr. John Ve			Director Name	· -				
Street Address 498 Broadway			Street Address					
						<u>_</u>		
City Providence	State RI	^{Zip} 02909	City		State	Zıp		
Director Name			Director Name	Director Name				
Street Address			Street Address					
City	State	Zip	City		State	Zip		
0.01		10. Shares Iss		.	<u> </u>			
9. Shares Authorized This information is currently of			Sued Check the box to indicate an attachment OF SHARES CLASS/SERIES PAR VALUE					
Department of State. Changes require an additional filing.		100		Common		NONE		
11. This report must be exec	uted on behalf of the	corporation by an	authorized represe	ntative. If the corpor	ation is in	the hands of a receiver or		
trustee, this report must be e	executed on behalf o	f the corporation by	the receiver or trus	stee.				
Under penalty of perjury, I statements, and that all sta				cluding any accom	panying s	schedules and		
Name of Authorized Representative			•	Date		15/10		
John VENDET			7 i	1 /13/19				
Signature of Authorized Rep		1 0/.	CUMENT HERE					
	> 701	4-ACELPY	OUNIEM HERE					
MAIL TO:		-						

MAIL TO:

Division of Business Services

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

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