

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019

Corporation

FILED

MAR 04 2019

→ 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 <u>000104877</u>		2. Exact name of the Corporation <u>NEW ENGLAND APPLIANCE REPAIR INC.</u>		BY <u>8074 DS</u>	
3. Principal Office Address <u>104 HARRIS ST</u>		City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>	
4. NAICS Code <u>811412</u>	6. Brief description of the character of business conducted in Rhode Island <u>Travel to CUST. HOME + REPAIR APPLIANCES</u>				
5. State of Incorporation <u>RI</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>STEPHEN J WUJCIK</u>			Vice-President Name <u>TOM CARR</u>		
Street Address <u>21 BALLSTON AVE</u>			Street Address <u>205 OAKDALE AVE</u>		
City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>	City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02860</u>
Secretary Name <u>STEPHEN J WUJCIK</u>			Treasurer Name <u>TOM CARR</u>		
Street Address <u>21 BALLSTON AVE</u>			Street Address <u>205 OAKDALE AVE</u>		
City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>	City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02860</u>
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
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 <input type="checkbox"/>		
This information is currently of record in the Department of State. <u>S. WUJCIK</u>			NUMBER OF SHARES <u>100</u>		
Changes require an additional filing. <u>T. CARR</u>			CLASS/SERIES <u>STK</u>		
			PAR VALUE <u>0</u>		
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 <u>STEPHEN J WUJCIK</u>					Date <u>2/27/19</u>
Signature of Authorized Representative <u>Stephen J Wujcik</u>					SIGN DOCUMENT HERE