



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

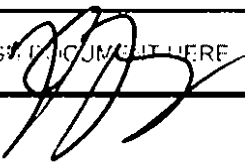
→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

MAR 25 2019

28794

| 1. Entity ID Number 000878598 | | 2. Exact name of the Corporation CK Custom Kabinetry, Inc. | | | | | | | | | |
|--|--------------------|--|---|------------------------|---------------------|------------------|--------------|-----------|-----|--------|--------------|
| 3. Principal Office Address 93 Hazel Street | | | City Woonsocket | State RI | Zip 02895 | | | | | | |
| 4. NAICS Code 337110 | | 6. Brief description of the character of business conducted in Rhode Island Cabinet construction and installation and any lawful business. | | | | | | | | | |
| 5. State of Incorporation RI | | | | | | | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | | | | | | | |
| President Name Kory P. Keegan | | | Vice-President Name | | | | | | | | |
| Street Address 1155 Victory Highway | | | Street Address | | | | | | | | |
| City Oakland | State RI | Zip 02858 | City | State | Zip | | | | | | |
| Secretary Name Kory P. Keegan | | | Treasurer Name Kory P. Keegan | | | | | | | | |
| Street Address 1155 Victory Highway | | | Street Address 1155 Victory Highway | | | | | | | | |
| City Oakland | State RI | Zip 02858 | City Oakland | State RI | Zip 02858 | | | | | | |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | | | | | | | |
| Director Name | | | Director Name | | | | | | | | |
| 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. Changes require an additional filing. | | | <table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> </tbody> </table> | | | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | 100 | Common | No Par Value |
| | | | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | | | | | | |
| 100 | Common | No 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 Kory P. Keegan | | | | Date 1/12/19 | | | | | | | |
| Signature of Authorized Representative  | | | | | | | | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov