



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: Corporation

2019

57. P

- 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 000105160		2. Exact name of the Corporation Savoie Enterprises, Inc.				
3. Principal Office Address Beacon Hill Road			City Block Island	State RI	Zip 02807	
4. NAICS Code 238310		6. Brief description of the character of business conducted in Rhode Island Plastering and related services.				
5. State of Incorporation RI						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name John T. Savoie			Vice-President Name Abra Savoie			
Street Address PO Box 86, Beacon Hill Road			Street Address PO Box 86, Beacon Hill Road			
City Block Island	State RI	Zip 02807	City Block Island	State RI	Zip 02807	
Secretary Name Abra Savoie			Treasurer Name			
Street Address PO Box 86			Street Address			
City Block Island	State RI	Zip	City	State	Zip	
8 List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name John T. Savoie			Director Name			
Street Address PO Box 86, Beacon Hill Road			Street Address			
City Block Island	State RI	Zip 02807	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.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE	
		100			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. <i>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.</i>						
Name of Authorized Representative Elliot Taubman, Esq.				Date 9/9/2019		
Signature of Authorized Representative <i>Elliot Taubman</i>						

FILED

SEP 13 2019

BY

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A.A

MAIL TO:
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