



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2020**
Corporation

→ 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 71186		2. Exact name of the Corporation O. E. S. Cleaning Service, Inc.												
3. Principal Office Address 394 Tunk Hill Road			City Hope	State RI	Zip 02831									
4. NAICS Code 812990		6. Brief description of the character of business conducted in Rhode Island Janitorial cleaning business.												
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 Alfred Crudale, III			Vice-President Name Alfred Crudale, III											
Street Address 394 Tunk Hill Road			Street Address 394 Tunk Hill Road											
City Hope	State RI	Zip 02831	City Hope	State RI	Zip 02831									
Secretary Name Alfred Crudale, III			Treasurer Name Alfred Crudale, III											
Street Address 394 Tunk Hill Road			Street Address 394 Tunk Hill Road											
City Hope	State RI	Zip 02831	City Hope	State RI	Zip 02831									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Alfred Crudale, III			Director Name None											
Street Address 394 Tunk Hill Road			Street Address											
City Hope	State RI	Zip 02831	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200	Common	No Par Value			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
200	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 Alfred Crudale, III, President				Date 2-13-2020										
Signature of Authorized Representative <i>Alfred Crudale</i>				SIGN DOCUMENT HERE FILED <i>KM</i>										

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 630 - Revised: 10/2017