



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.

FILED

STAMP

FEB 20 2020

49643

FOR SECRETARY OF STATE
 C. J. COVATTA

1. Entity ID Number 14419		2. Exact name of the Corporation National Refrigeration, Inc.					
3. Principal Office Address 3600 West Shore Road			City Warwick	State RI	Zip 02886		
4. NAICS Code 23 8220		6. Brief description of the character of business conducted in Rhode Island HVAC & Plumbing Constructing & Services					
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 Jack F. King, Jr.			Vice-President Name John Barba				
Street Address 3600 West Shore Road			Street Address 3600 West Shore Road				
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886		
Secretary Name Brian Oliva			Treasurer Name Jack F. King, Jr.				
Street Address 3600 West Shore Road			Street Address 3600 West Shore Road				
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886		
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							
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"/>					
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
		100		Class A Voting		\$.01	
		9900		Class A Nonvoting		\$.01	
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 Jack F. King, Jr., President					Date 1-10-20		
Signature of Authorized Representative 					SIGN DOCUMENT HERE		

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