



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

FEB 24 2020

02

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.

W 1761

1. Entity ID Number 000132373		2. Exact name of the Corporation BARLO SIGNS INTERNATOTINAL, INC.			
3. Principal Office Address 158 Greeley Street		City Hudson		State NH	Zip 03051
4. NAICS Code 754390		6. Brief description of the character of business conducted in Rhode Island Sale, installation and maintenance of signage			
5. State of Incorporation NH					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Raymond Brayton			Vice-President Name		
Street Address 158 Greeley Street			Street Address		
City Hudson	State NH	Zip 03051	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Patricia Assioun Patrick Assioun			Director Name		
Street Address 158 Greeley Street			Street Address		
City Hudson	State NH	Zip 03051	City	State	Zip
Director Name Raymond Brayton			Director Name		
Street Address 158 Greeley Street			Street Address		
City Hudson	State NH	Zip 03051	City	State	Zip
9. Shares Authorized 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.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			1000	common	\$1.00
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 RAYMOND BRAYTON					Date 2/10/2020
Signature of Authorized Representative 					