



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

MAY 27 2020

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1. Entity ID Number 001691978		2. Exact name of the Corporation THE DYING DAYS OF DIONYSUS, INC.												
3. Principal Office Address 93 Manton Avenue			City Providence	State RI	Zip 02909									
4. NAICS Code 722410		6. Brief description of the character of business conducted in Rhode Island Operation of a Bar												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Michael Sears			Vice-President Name											
Street Address 93 Manton Avenue			Street Address											
City Providence	State RI	Zip 02909	City	State	Zip									
Secretary Name Michael Sears			Treasurer Name Michael Sears											
Street Address 93 Manton Avenue			Street Address 93 Manton Avenue											
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02903									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Michael Sears			Director Name											
Street Address 93 Manton Avenue			Street Address											
City Providence	State RI	Zip 02903	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"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>2000 - 100 Issued</td> <td>Common</td> <td>No Par</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	2000 - 100 Issued	Common	No Par			
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2000 - 100 Issued	Common	No Par												
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 Michael Sears				Date 5/15/20										
Signature of Authorized Representative 														

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov