Date: 6/30/2020 4:00:00 PM RI SOS Filing Number: 202044034520 State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2020 Corporation

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→ Filing period January 1 - March 1

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1. Entity ID Number		2. Exact name of the Corporation					
000061942	R.I. KITC	R.I. KITCHEN & BATH, INC.					
3. Principal Office Address 139 JEFFERSON BLVD.			City WARWICK		State RI	Z _I p 02888	
4. NAICS Code	6. Brief desc	ription of the charac	cter of business c	onducted in Rhode I	sland	1	
236116	CONSTRUC	CONSTRUCTION AND REMODELING, SALES AND INSTALLATION OF KITCHEN AND BATH					
5. State of Incorporation		RELATED PRODUCTS.					
RHODE ISLAND							
7. List ALL officers (names a	and addresses)			Check	the box to in	idicate an attachment	
President Name TANYA M. D	Vice-President Name						
Street Address 139 JEFFERSON BLVD.			Street Address				
City WARWICK	State RI	Zip 02888	City		State	Zıç	
Secretary Name TANYA M. D	TANYA M. DONAHUE			Treasurer Name TANYA M. DONAHUE			
Street Address 139 JEFFERSON BLVD.			Street Address 139 JEFFERSON BLVD.				
City WARWICK	State RI	Zip 02888	City WARWICK		State RI	Z _{IP} 02888	
B. List ALL directors (names	and addresses)				the box to ir	ndicate an attachment	
Director Name TANYA M. DO	ONAHUE		Director Name	•	•		
Street Address 139 JEFFERSON BLVD.			Street Address				
WARWICK	State RI	Z _{IP} 02888	City		State	Zıp	
Director Name	-	<u> </u>	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.			OF SHARES		C. ASS/SÉRIES FAR VALUE		
		157.9		COMMON		NO PAR VALUE	
Changes require an additiona	al filing.		· · · -				
11 This report must be exec	cuted on behalf of the	corporation by an	authorized repres	i. sentative. If the corp	oration is in t	i he hands of a receive	
trustee, this report must be	executed on behalf o	f the corporation by	the receiver or tr	rustee.			
Under penalty of perjury, i statements, and that all st				ncluding any accol	mpanying so	cnedules and	
Name of Authorized Repres		<u> </u>			Date .	2 2	
TANYA M. DONAHUE	A	٦ <i>^</i>			6-	3-2020	
Signature of Authorized Ren	Silestentative	Del se se	OSMENT HERE	FILED	l		
* WX 1	WULLING	11111	ulli-				
IAML TO /	/	1		JUN 3 0 2021)		

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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