



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2021
Corporation _____

STAMP
FILED FOR

JAN 12 2021

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY 1032 DS

1. Entity ID Number 1675989		2. Exact name of the Corporation Alcee, Inc.			
3. Principal Office Address 22 First Street			City East Providence	State RI	Zip 02914-0000
4. NAICS Code 339910		6. Brief description of the character of business conducted in Rhode Island to manufacture jewelry and giftware and any other lawful purpose			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Edward N. DeCristofaro			Vice-President Name Edward N. DeCristofaro		
Street Address 22 First Street			Street Address 22 First Street		
City East Providence	State Ri	Zip 02864-	City East Providence	State RI	Zip 02914-
Secretary Name Edward N. DeCristofaro			Treasurer Name Edward N. DeCristofaro		
Street Address 22 First Street			Street Address 22 First Street		
City East Providence	State RI	Zip 02914-	City East Providence	State RI	Zip 02914-
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Edward N. DeCristofaro			Director Name none		
Street Address 22 First Street			Street Address none		
City East Providence	State RI	Zip 02914-	City none	State none	Zip none
Director Name none			Director Name none		
Street Address none			Street Address none		
City none	State none	Zip none	City none	State none	Zip none
9. Shares Authorized 10. Shares Issued <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.			Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES 60	CLASS/SERIES Common	PAR VALUE 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. <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 Edward N. DeCristofaro President				Date 1/04/2021	
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
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