State of Rhode Island

Department of State - Business Services Division

FILED
JAN 20 2021
BY 17702

Annual Report for the year: 2021

Corporation

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

1. Entity ID Number	2. Exact name of the Corporation
90174	Columbus Fan & Machine Corp

3. Principal Office Address	City	State	Zip
59 Baker Street	Warren	RI	02885

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
423840	Sales of Machinery & Equipment
5. State of Incorporation	
Rhode Island	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
David P. Cioe	David P. Cioe
Street Address: 59 Baker Street	Street Address: 59 Baker Street
City: Warren, State: RI, Zip: 02885	City: Warren, State: RI, Zip: 02885
Secretary Name: David P. Cioe	Treasurer Name: David P. Cioe
Street Address: 59 Baker Street	Street Address: 59 Baker Street
City: Warren, State: RI, Zip: 02885	City: Warren, State: RI, Zip: 02885

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
David P. Cioe	
Street Address: 59 Baker Streey	Street Address:
City: Warren, State: RI, Zip: 02885	City: , State: , Zip:
Director Name:	Director Name:
Street Address:	Street Address:
City: , State: , Zip:	City: , State: , Zip:

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	100	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	Date
David P. Cioe	January 14 2021

Signature of Authorized Representative: David P. Cioe

MAIL TO:
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