



State of Rhode Island
Department of State - Business Services Division

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.

FILED STAMP
JAN 20 2021 FOR
BY 43500 *DS*

1. Entity ID Number 19214		2. Exact name of the Corporation YORKER SHOES, INC.			
3. Principal Office Address 1503 Hartford Avenue			City Johnston	State RI	Zip 02919-0000
4. NAICS Code 424340		6. Brief description of the character of business conducted in Rhode Island retail shoe sales			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Richard D. Tamaro, Jr.			Vice-President Name Lorraine E. Tamaro		
Street Address 28 Countryside Lane			Street Address 28 Countryside Lane		
City North Scituate	State RI	Zip 02857-	City North Scituate	State RI	Zip 02857-
Secretary Name Lorraine E. Tamaro			Treasurer Name Richard D. Tamaro, Jr.		
Street Address 28 Countryside Lane			Street Address 28 Countryside Lane		
City North Scituate	State RI	Zip 02857-	City North Scituate	State RI	Zip 02857-
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Richard D. Tamaro, Jr.			Director Name Lorraine E. Tamaro		
Street Address 28 Countryside Lane			Street Address 28 Countryside Lane		
City North Scituate	State RI	Zip 02857-	City North Scituate	State RI	Zip 02857-
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					
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
			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. <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 Richard D. Tamaro, Jr.				Date 1/04/2021	
Signature of Authorized Representative <i>Richard D. Tamaro, Jr.</i>					