State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2021

Filing Period: January 1 - March 1 • **Filing Fee:** $50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00*

1. Corporate ID No.	2. Name of Corporation			
488387	BEA SMITH'S INC.			
3. Street Address Principal Business Office		City	State	Zip
64 High Street, Unit 4		Ashaway	RI	02804
4. Business Phone No	5. State of Incorporation			
401-596-3522	Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island				
Clothing Retail				

CU522101

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Raymond W. Smith			Sharon K. Smith		
Street Address			Street Address		
79 Woody Hill Road			79 Woody Hill Road		
City	State	Zip	City	State	Zip
Bradford	RI	02808	Bradford	RI	02808
Secretary Name			Treasurer Name		
Raymond W. Smith			Raymond W. Smith		
Street Address			Street Address		
79 Woody Hill Road			79 Woody Hill Road		
City	State	Zip	City	State	Zip
Bradford	RI	02808	Bradford	RI	02808

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Raymond W. Smith			Sharon K. Smith		
Street Address			Street Address		
79 Woody Hill Road			79 Woody Hill Road		
City	State	Zip	City	State	Zip
Bradford	RI	02808	Bradford	RI	02808
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 Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	Common	0
THIS SECTION	MUST BE COMPLETED	

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.

[redacted]

FILED
JAN 29 2021
BY

File Date _____

Check No 1830

By: _____

FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Raymond W. Smith 1-26-21

Signature *Date*

RAYMOND W. SMITH

Print or Type Name

President

Title