



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

JAN 29 2021

BY

1. Entity ID Number 51662		2. Exact name of the Corporation FIREX, INC.												
3. Principal Office Address 42 RUSSO ROAD			City PORTSMOUTH	State RI	Zip 02871									
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island TO SELL, LEASE, SERVICE AND REPAIR FIREFIGHTING APPARATUS AND EQUIPMENT												
5. State of Incorporation RHODE ISLAND														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name JANICE M. McLAUGHLIN			Vice-President Name JANICE M. McLAUGHLIN											
Street Address 2 TYLER STREET			Street Address 2 TYLER STREET											
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840									
Secretary Name JANICE M. McLAUGHLIN			Treasurer Name JANICE M. McLAUGHLIN											
Street Address 2 TYLER STREET			Street Address 2 TYLER STREET											
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name N/A			Director Name N/A											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name N/A			Director Name N/A											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
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 ☐											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>COMMON</td> <td>NO PAR</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	COMMON	NO PAR			
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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 JANICE M. McLAUGHLIN, PRESIDENT					Date January 25, 2021									
Signature of Authorized Representative 														