



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.

RECEIVED
STATE
R.I. DEPT. OF
BUS. SVCS. DIV.
2021 FEB -4
AM 9:39

1. Entity ID Number 38084		2. Exact name of the Corporation Industrial Pump Sales & Service, Inc.			
3. Principal Office Address 37 William S. Canning Boulevard			City Tiverton	State RI	Zip 02725
4. NAICS Code 423450		6. Brief description of the character of business conducted in Rhode Island Buy and sell at wholesale industrial pumps and related equipment.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Bruce G. Levesque			Vice-President Name Bruce G. Levesque		
Street Address 115 Sunset Drive			Street Address 115 Sunset Drive		
City Somerset	State MA	Zip 02725	City Somerset	State MA	Zip 02725
Secretary Name Bruce G. Levesque			Treasurer Name Bruce G. Levesque		
Street Address 115 Sunset Drive			Street Address 115 Sunset Drive		
City Somerset	State MA	Zip 02725	City Somerset	State MA	Zip 02725
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Bruce G. Levesque			Director Name Bruce G. Levesque		
Street Address 115 Sunset Drive			Street Address 115 Sunset Drive		
City Somerset	State MA	Zip 02725	City Somerset	State MA	Zip 02725
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES 135	CLASS/SERIES Common	PAR VALUE No Par Value
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 Bruce G. Levesque				Date 1/25/2021	
Signature of Authorized Representative 				FILED FEB 04 2021 BY CH CH 884/30 9:39	