



**Department of State - Business Services Division**

**Annual Report for the year:** 2021  
**Corporation**

**FILED TAMP**

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

FEB 10 2021  
 BY [Signature]

1. Entity ID Number 000010191		2. Exact name of the Corporation GEMMA LAW ASSOCIATES, INC.			
3. Principal Office Address 231 RESERVOIR AVENUE			City PROVIDENCE	State RI	Zip 02907
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island LAW OFFICE			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name PETER GEMMA			Vice-President Name MARK GEMMA		
Street Address 15 WILDFLOWER ROAD			Street Address 1 WAYLAND AVE, UNIT 311-N		
City BARRINGTON	State RI	Zip 02806	City PROVIDENCE	State RI	Zip 02906
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		1000		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. <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 PETER GEMMA <u>[Signature]</u>				Date 2/8/21	
Signature of Authorized Representative					