RI SOS Filing Number: 202192075880 Date: 2/18/2021 4:00:00 PM

Department of S	tate - Busin	ess Services	Division	۲	iLED	07440	
Annual Report for the y	ear: ₂₀₂₁			Circuit.	1000	STAMP	
Corporation → Filing period: January 1 - March 1			_	!	18 202	FOR ALL	
→ Filing Fee: \$50.00 → Penalty: Additional \$25.00	fee if form is n	ot filed by April 1.		B√			
Entity ID Number	2 Exact name of the Corporation						
145772	WATER TREATMENT SOLUTIONS, INC. City State Zip						
Principal Office Address 2225 Plainfield Pike	•				State RI	Zip 02919	
4 NAICS Code	6. Bnef desc	Bnef description of the character of business conducted in Rhode Island					
454390	INSTALLA	INSTALLATION, SALES AND SERVICE OF WATER TREATMENT SYSTEMS AND PARTS					
5. State of Incorporation RHODE ISLAND							
7. List ALL officers (names and a		Check the box to indicate an attachment					
President Name James M. Maccare	Vice-President Name None						
Street Address 66 Ginger Trail			Street Address				
City Coventry	State RI	Z _{IP} 02816	City		State	Zip	
Secretary Name James M. Maccar	Treasurer Name James M. Maccarone						
Street Address As above			Street Address As above				
City	State	Zip	City		State	Zıp	
8. List ALL directors (names and	addresses)		To:		the box to i	indicate an attachment 🔲	
Director Name None	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 This information is currently of record in the Department of State. Changes require an additional filing.					heck the box to indicate an attachment SERIES PAR VALUE		
		100	A SHAKES	CLASS/SERIES COMMON		NO PAR VALUE	
			,00				
11. This report must be executed					ration is in	the hands of a receiver or	
trustee, this report must be executive the control of the control					panying s	chedules and	
statements, and that all statements contained herein are true and correct. Name of Authorized Representative Date							
James M. Maccarone					2/1/21		
Signature of Authorized Represe	ntative				•		
MAIL TO:							

State of Rhode Island

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov