RI SOS Filing Number: 202192642280			Date: 2/23/2021 4:00:00 PM				
State of Rhode Island  Department of State - Business Services D			ivision				
Annual Report for the year: 2021				FE	B 23 20	21 179 17	
Corporation ————————————————————————————————————			-	, -	50 d	601	
<ul> <li>→ Filing period: January 1 - March 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by April 1.</li> </ul>				B'	d 54	<del>S</del>	
1. Entity ID Number	2. Exact name of	of the Corporation			_		
104398	Weinberg Glass Ltd.						
3. Principal Office Address 17 Franklin Street			City Warren		State RI	Z <sub>I</sub> p 02885	
I. NAICS Code	ICS Code 6. Brief description of the characte			onducted in Rhode Is	sland	<u> </u>	
339999	Artistic Glass Products						
5. State of Incorporation RI							
7. List ALL officers (names and add	dresses)	_		Check	the box to i	ndicate an attachment	
President Name Steven I. Weinberg			Vice-President Name				
Street Address 17 Franklin Street			Street Address				
<sup>City</sup> Warren	State RI	<sup>Zip</sup> 02885	City		State	Zip	
Secretary Name Steven I. Weinberg			Treasurer Name Steven I. Weinberg				
Street Address 17 Franklin Street			Street Address 17 Franklin Street				
City Warren	State RI	<sup>Zip</sup> 02885	City Warren		State RI	<sup>Z<sub>1</sub>p</sup> 02885	
<ol><li>List ALL directors (names and ac</li></ol>	ddresses)	<u> </u>			the box to i	indicate an attachment	
Director Name Steven I. Weinberg			Director Name				
Street Address 17 Franklin Street			Street Address				
City Warren	State RI	Z <sub>IP</sub> 02885	City		State	Zip	
Director Name			Director Name	•		<del>-</del>	
Street Address			Street Address	3	<del></del> .		
Dity	State	Zip	City	· · · · · · · · · · · · · · · · · · ·	State	Zip	
9. Shares Authorized		10. Shares Issu		Check	the box to i	indicate an attachment	
his information is currently of record in the Department of State. Changes require an additional filing.		100		Common		\$1.00	
Under penalty of perjury, I declar statements, and that all stateme	re and attirm tha nts contained be	IT I Dave examine: Brein are true and	a this report, it correct	ncluding any accom	panying s	chedules and	
Name of Authorized Representative		·	Date				
Steven I. Weinberg			2	.15.21			
Signature of Autorized Represent	ative						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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