State of Rhode Island
Department of State - Business Services Division

FILED
FEB 24 2021
BY 3561

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.

1. Entity ID Number	2. Exact name of the Corporation			
309672	MARTIN WOODWORKS INC			
3. Principal Office Address		City	State	Zip
3 BRIDAL AVE		WEST WARWICK	RI	02893
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
812990				
5. State of Incorporation				
Rhode Island	CABINET MAKER			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
JOSEPH MARTIN			MATTHOW MARTIN		
Street Address			Street Address		
305 TAFT AVE			19 HAYES ST		
City	State	Zip	City	State	Zip
WARWICK	RI	02886	WARWICK	RI	02886
Secretary Name			Treasurer Name		
CYNTHIA MARTIN					
Street Address			Street Address		
305 TAFT AVE					
City	State	Zip	City	State	Zip
WARWICK	RI	02886			

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name			Director Name		
NONE			NONE		
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 — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	1,000	NOPAR	.01

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	Date
JOSEPH MARTIN	2.22.21

Signature of Authorized Representative: Joseph Martin

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