RI SOS Filing Number: 202193258200 Date: 2/25/2021 4:00:00 PM

1
(NS)

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2021 Corporation

FILEDAMP

	•						
\rightarrow	Filing	period:	January	1	_	March	1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1

FEB 2 5 2021	
· 😾	•

Entity ID Number	Exact name of the Corporation									
138869	308 State St	reet, Inc.								
Principal Office Address		City		State	Zip					
12 Bullock Avenue			Barrington		RI	02806				
4. NAICS Code 6. Brief description of the character of business conducted in Rhode Island to buy, sell, manage and maintain real estate and rental property and any and all lawful business thereto RHODE ISLAND										
7. List ALL officers (names and ad	dresses)			Chack	the boy to in	dicate an attachment				
President Name John H. Aguiar, Ji	Check the box to indicate an attachment Vice-President Name Aaron J. Aguiar									
Street Address 12 Bullock Avenue			Street Address	4 Tiffany Circle						
City Barrington	State RI	^{Zip} 02806	City Barrings		State RI	^{Zip} 02806				
Secretary Name Marie E. Aguiar				^{ne} Marie E. Aguiar	-	•				
Street Address 12 Bullock Avenue			Street Address 12 Bullock Avenue							
City Barrington	State RI	Zip 02806	City Barring	ton	State RI	^{Z₁p} 02806				
8. List ALL directors (names and a	ddresses)			Check	the box to in	ndicate an attachment				
Director Name John H. Aguiar, Jr.			Director Name Marie E. Aguiar							
Street Address 12 Bullock Avenue			Street Address 12 Bullock Avenue							
City Barrington	State RI	^{Zip} 02806		City Barrington		^{Zip} 02806				
Director Name Aaron J. Aguiar		Director Name Alison M. Aguiar								
Street Address 4 Tiffany Circle	Street Address 12 Bullock Avenue									
City Barrington	State RI	^{Zip} 02806	City Barring	nyton		^{Zip} 02806				
9. Shares Authorized	··· ·	10. Shares Iss				ndicate an attachment 🔲				
This information is currently of record in the Department of State.		NUMBER OF	SHARES	COMMON		NO PAR				
Changes require an additional filing.	,		 .							
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 executed executed on behalf of the corporation by the executed executed executed on behalf of the corporation by the executed execute										
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										
John H. Aguiar, Jr., President										
Signature of Authorized Representative John SIGN DOCUMENT HERE & Presendent										

MAIL TO:

Division of Business Services

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

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