RI SOS Filing Number: 202193317970 Date: 2/26/2021 4:00:00 PM

State of Rhode Island

Department of State - Business Services Division

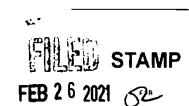
Annual Report for the year: 2021

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 797966 EARLE DIAS INTERIORS AND CARPET CLEANING, INC. 3 Principal Office Address City State Zip 151 WINTHROP STREET REHOBOTH MA 02769 4. NAICS Code 6. Brief description of the character of business conducted in Rhode Island 442210 CARPET AND FLOORING INSTALLATION, MAINTENANCE AND SALES State of Incorporation MASSACHUSETTS List ALL officers (names and addresses). Check the box to indicate an attachment President Name EARLE DIAS Vice-President Name EARLE DIAS Street Address 91 RESERVOIR AVENUE Street Address 91 RESERVOIR AVENUE State MA City REHOBOTH State MA Zip 02769 City REHOBOTH ^{Zıp} 02769 Secretary Name PRISCILLA M DIAS Treasurer Name EARLE DIAS Street Address 91 RESERVOIR AVENUE Street Address 91 RESERVOIR AVENUE State MA City REHOBOTH State Žip 02769 Zip 02769 City REHOBOTH 8. List ALL directors (names and addresses) Check the box to indicate an attachment Director Name EARLE DIAS Director Name PRISCILLA M DIAS Street Address 91 RESERVOIR AVENUE Street Address 91 RESERVOIR AVENUE City REHOBOTH State Zip 02769 City REHOBOTH Zip 02769 MA MA Director Name NONE Director Name NONE Street Address Street Address City State Zip City State Shares Authorized 10. Shares Issued Check the box to indicate an attachment This information is currently of record in the NUMBER OF SHARES PAR VALUE Department of State. 275,000 COMMON \$100 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 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 2/24/2021

MAIL TO:

EARLE DIAS

Division of Business Services

Signature of Authorized Representative

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

rusciela m. Dens, Carp Secretary

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