



State of Rhode Island

## Department of State - Business Services Division

FILED

MAR 5 2021 STAMP

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.

6537

|   |             |   |   |             |                 |
|---|-------------|---|---|-------------|-----------------|
| 1. Entity ID Number<br>000161216  |             | 2. Exact name of the Corporation<br>Creative Vision Design Co., Inc.                          |   |             |                 |
| 3. Principal Office Address<br>21 College Hill Road   |             |   | City<br>Warwick   | State<br>RI | Zip<br>02886    |
| 4. NAICS Code<br>541430   |             | 6. Brief description of the character of business conducted in Rhode Island<br>Graphic Design |   |             |                 |
| 5. State of Incorporation<br>RI   |             |   |   |             |                 |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |             |   |   |             |                 |
| President Name<br>Gregory J. Gonsalves  |             |   | Vice-President Name<br>Dena M. Gonsalves  |             |                 |
| Street Address<br>21 College Hill Road  |             |   | Street Address<br>21 College Hill Road  |             |                 |
| City<br>Warwick   | State<br>RI | Zip<br>02886  | City<br>Warwick   | State<br>RI | Zip<br>02886    |
| Secretary Name<br>Gregory J. Gonsalves  |             |   | Treasurer Name<br>Dena M. Gonsalves   |             |                 |
| Street Address<br>21 College Hill Road  |             |   | Street Address<br>21 College Hill Road  |             |                 |
| City<br>Warwick   | State<br>RI | Zip<br>02886  | City<br>Warwick   | State<br>RI | Zip<br>02886    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |             |   |   |             |                 |
| Director Name<br>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  |             |   | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |             |                 |
| This Information is currently of record in the Department of State.<br><br>Changes require an additional filing.  |             |   | NUMBER OF SHARES  |             |                 |
|   |             |   | CLASS/SERIES  |             | PAR VALUE       |
|   |             |   | 200   | Common      | No Par          |
| 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. |             |   |   |             |                 |
| <b>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.</b>                                       |             |   |   |             |                 |
| Name of Authorized Representative<br>Gregory J. Gonsalves   |             |   |   |             | Date<br>2/26/21 |
| Signature of Authorized Representative<br>  |             |   |   |             |                 |

MAIL TO:  
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