RI SOS Filing Number: 202195165920 Date: 3/29/2021 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.

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STAMP

1. Entity ID Number	2. Exact name of the Corporation			
64777	D&G MARKETING INC.			
3. Principal Office Address		City	State	Zip
P.O. Box 16484		RUMFORD	R.I.	02916
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
541611	SALES/ CONSULTING			
5. State of Incorporation				
R.I.				

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

President Name			Vice-President Name		
N/A			DAVID L HANNA JR.		
Street Address			Street Address		
			P.O. Box 16484		
City	State	Zip	City	State	Zip
			RUMFORD	R.I.	02916
Secretary Name			Treasurer Name		
			DAVID L HANNA JR		
Street Address			Street Address		
			10 HANNAH ST.		
City	State	Zip	City	State	Zip
			RUMFORD	RI	02916

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

Director Name			Director Name		
			DAVID L HANNA JR		
Street Address			Street Address		
			P.O. Box 16484 10 HANNAH ST.		
City	State	Zip	City	State	Zip
			RUMFORD	RI	02916
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		.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
DAVID L. HANNA JR.	3/28/21
Signature of Authorized Representative	
David L Hanna	FILED

MAR 29 2021

IKL YMGD7
3:33

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 08/2020