



**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corp
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2021

1. Corporate ID No. 000118286

2. Name of Corporation NORTH ATLANTIC FIRE & SAFETY EQUIPMENT, INC.

3. Street Address Principal Business Office:

No. and Street: PO BOX 2083
City or Town: PLAINVILLE State: MA Zip: 02762 Country: USA

5. State of Incorporation

State: MA

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

238220

6. Brief Description of the Character of Business Conducted in Rhode Island

TO ENGAGE IN, CONDUCT AND MAINTAIN A BUSINESS PROVIDING SALES, MAINTENANCE, SERVICE, REPAIR AND INSTALLATION OF FIRE PREVENTION AND SUPPRESSION EQUIPMENT AND SUPPLIES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ANGELA C DANIELS	PO BOX 2083 PLAINVILLE, MA 02762-2196 USA
TREASURER	ANGELA C DANIELS	PO BOX 2083 PLAINVILLE, MA 02762 USA
SECRETARY	ANGELA C DANIELS	PO BOX 2083 PLAINVILLE, MA 02762 USA

DIRECTOR	ANGELA C DANIELS	PO BOX 2083 PLAINVILLE, MA 02762 USA
DIRECTOR	ANGELA C. DANIELS	234 ONEIL BLVD ATTLEBOROUGH, MA 02703 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	20,000.00	1000

9. 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.

Signed this 8 Day of August, 2021 at 4:08:20 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ANGELA C. DANIELS
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

August 08, 2021 04:07 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea", is written over a light blue circular watermark that matches the Seal of the State of Rhode Island.

Nellie M. Gorbea
Secretary of State

