



State of Rhode Island
Department of State - Business Services Division

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 DEPARTMENT OF STATE
 BUSINESS SERVICES DIVISION
 2021 AUG 13 PM 12:00

Annual Report for the year: 2020 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 001672438		2. Exact name of the Corporation CAMPOS MARKET INC			
3. Principal Office Address 110 PUTMAN STREET		City PROVIDENCE		State RI	Zip 02909
4. NAICS Code 445120		6. Brief description of the character of business conducted in Rhode Island <i>Grocery Store</i>			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JENNIFER M CAMPOS			Vice-President Name		
Street Address 110 PUTMAN STREET			Street Address		
City PROVIDENCE	State RI	Zip 02909	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			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 Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100 ⁺	CNP	\$0.00	
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. <i>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.</i>					
Name of Authorized Representative JENNIFER M CAMPOS				Date 8/9/2021	
Signature of Authorized Representative <i>Jennifer Marie Campos</i>				FILED	

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

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