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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BUS SVCS DIV
2021 OCT 27 PM 3:28

1. Entity ID Number	2. Exact name of the Corporation		
1659983	Providence Food Corp		
3. Principal Office Address: 863 Broad St	City: Providence	State: RI	Zip: 02907
4. NAICS Code: 445110	6. Brief description of the character of business conducted in Rhode Island: Grocery, Retail		
5. State of Incorporation: RI			

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

President Name	Vice-President Name
Andres M. Ferreira	Jesus R. Acosta
Street Address: 10 Long Ridge Land	Street Address: 231 Ferraris St
City: Old Brookville; State: NY; Zip: 11545	City: Copiague; State: NY; Zip: 11726
Secretary Name: Geraldine Acosta	Treasurer Name:
Street Address: 231 Ferraris St	Street Address:
City: Copiague; State: NY; Zip: 11726	City: ; State: ; Zip:

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

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

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
200		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.

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
Geraldine Acosta	10/20/21
Signature of Authorized Representative: Geraldine Acosta	

2021 NOV -1 PM 2:42 RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

FILED
NOV 08 2021
BY 62570 A.A. 2:43 P.M.

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