



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020
CorporationRECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2021 DEC 22 AM 11:23

- 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 000904088		2. Exact name of the Corporation Sea Star Janitorial Services, Inc			
3. Principal Office Address 47 Cotter St		City East Providence		State RI	Zip 02914
4. NAICS Code 236115 81-Other Services		6. Brief description of the character of business conducted in Rhode Island Janitorial Services			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Rogerio Fortes			Vice-President Name Rogerio Fortes		
Street Address P.O Box 124			Street Address P.O. Box 124		
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
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 Roger Fortes			Director Name Roger Fortes		
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		
			Common		
			No Par Value		
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 Rogerio Fortes				Date 11-29-2021	
Signature of Authorized Representative					

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

DEC 22 2021
 47346+
 11:26