

State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

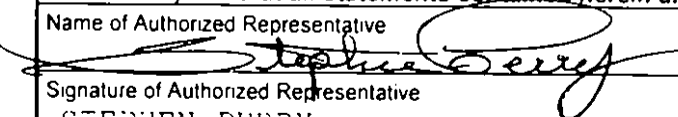
- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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1. Entity ID Number 11064454		2. Exact name of the Corporation INDUSTRIAL FLEET SERVICE, INC.			
3. Principal Office Address P.O. BOX 364			City SOMERSET	State MA	Zip 02726
4. NAICS Code 532400		6. Brief description of the character of business conducted in Rhode Island FORKLIFT EQUIP REPAIR			
5. State of Incorporation MA					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment
President Name MICHAEL PEREIRA			Vice-President Name		
Street Address 1076 HIXVILLE RD			Street Address		
City DARTMOUTH	State MA	Zip 02747	City	State	Zip
Secretary Name STEPHEN PERRY			Treasurer Name STEPHEN PERRY		
Street Address 2 ALTHAM ST.			Street Address 2 ALTHAM ST.		
City SWANSEA	State MA	Zip 02777	City SWANSEA	State MA	Zip 02777
8. List ALL directors (names and addresses)					Check the box to indicate an attachment
Director Name MICHAEL PEREIRA			Director Name STEPHEN PERRY		
Street Address 1076 HIXVILLE RD			Street Address 2 ALTHAM ST.		
City DARTMOUTH	State MA	Zip 02747	City SWANSEA	State MA	Zip 02777
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		500		CNP	0
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 1/3/2022
Signature of Authorized Representative STEPHEN PERRY					

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
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Website: www.sos.ri.gov