



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

FEB 25 2022

BY

1. Entity ID Number 000541269		2. Exact name of the Corporation AMBROSE TENNIS, INC.	
3. Principal Office Address 72 OAK HILL AVENUE		City PAWTUCKET	State RI
		Zip 02860	
4. NAICS Code 451110	6. Brief description of the character of business conducted in Rhode Island PROFESSIONAL TENNIS SERVICES: INCLUDING, STRINGING, RACKET CUSTOMIZATION AND CLOTHING/SHOES/EQUIPMENT SALES		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name EVAN PAUL AMBROSE		Vice-President Name	
Street Address 72 OAK HILL AVENUE		Street Address	
City PAWTUCKET	State RI	Zip 02860	
Secretary Name		Treasurer Name	
Street Address		Street Address	
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	
Director Name		Director Name	
Street Address		Street Address	
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
		100.00	STK
		PAR VALUE	
		0.01	
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 EVAN PAUL AMBROSE		Date 2.22.22	
Signature of Authorized Representative 			

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