



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022

Corporation

→ Filing period: February 1 - May 1

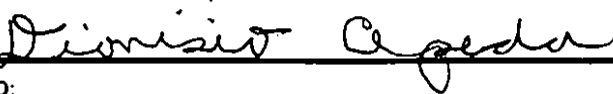
→ Filing Fee: \$50.00

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

FILED MF

FEB 25 2022

BY

1. Entity ID Number 276490		2. Exact name of the Corporation DINO ENTERPRISES, INC.			
3. Principal Office Address P.O. Box 20086			City Cranston	State RI	Zip 02920
4. NAICS Code 53110		6. Brief description of the character of business conducted in Rhode Island Real Estate Investment			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Dionisio Cepeda			Vice-President Name Dionisio Cepeda		
Street Address P.O. Box 20086			Street Address P.O. Box 20086		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Dionisio Cepeda			Treasurer Name Dionisio Cepeda		
Street Address P.O. Box 20086			Street Address P.O. Box 20086		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
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	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 Dionisio Cepeda, President					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