



State of Rhode Island and Providence Plantations

## 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.

**FILED**

APR 05 2022

BY

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OS

1. Entity ID Number <b>488904</b>		2. Exact name of the Corporation <b>B. Baptista Electric Inc.</b>	
3. Principal Office Address <b>79 Ralco Way #4</b>		City <b>Cumberland</b>	State <b>RI</b>
		Zip <b>02864</b>	
4. NAICS Code <b>238210</b>	6. Brief description of the character of business conducted in Rhode Island <b>To provide electrical contracting services for residential, commercial, and industrial projects.</b>		
5. State of Incorporation <b>Rhode Island</b>			
7. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment			
President Name <b>Benjamin B. Baptista</b>		Vice-President Name	
Street Address <b>79 Ralco Way #4</b>		Street Address	
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	
Secretary Name <b>Benjamin B. Baptista</b>		Treasurer Name <b>Benjamin B. Baptista</b>	
Street Address <b>79 Ralco Way #4</b>		Street Address <b>79 Ralco Way #4</b>	
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	
8. List ALL directors (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment			
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 <input type="checkbox"/> Check the box to indicate an attachment	
This information is currently of record in the Department of State.		NUMBER OF SHARES CLASS/SERIES PAR VALUE	
Changes require an additional filing.		<b>50</b>	<b>COMMON NO PAR</b>
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 <b>Benjamin B. Baptista, President</b>			Date
Signature of Authorized Representative <i>Benjamin B. Baptista</i>			SIGN DOCUMENT HERE