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State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

2022 APR 21 A 11:28

**Annual Report for the year: 2021 Corporation**

- 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 <b>000157071</b>		2. Exact name of the Corporation <b>A &amp; A Window Products, Inc</b>	
3. Principal Office Address <b>15 Joseph Street</b>		City <b>Malden</b>	State <b>MA</b>
		Zip <b>02148</b>	
4. NAICS Code <b>238160</b>	6. Brief description of the character of business conducted in Rhode Island <b>Replacement Windows, Storefront, Curtain wall, Glass, Service Work and Leak Investigations in different buildings throughout Rhode Island</b>		
5. State of Incorporation <b>Massachusetts</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Lee Sullivan</b>		Vice-President Name <b>Matthew Johnson</b>	
Street Address <b>24 Cory Lane</b>		Street Address <b>41 Stanley Road</b>	
City <b>Reading</b>	State <b>MA</b>	City <b>Belmont</b>	State <b>MA</b>
Zip <b>01867</b>		Zip <b>02478</b>	
Secretary Name <b>Christine Sullivan</b>		Treasurer Name <b>Christine Sullivan</b>	
Street Address <b>24 Cory Lane</b>		Street Address <b>24 Cory Lane</b>	
City <b>Reading</b>	State <b>MA</b>	City <b>Reading</b>	State <b>MA</b>
Zip <b>01867</b>		Zip <b>01867</b>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Christine Sullivan</b>		Director Name <b>Caroline Sullivan</b>	
Street Address <b>24 Cory Lane</b>		Street Address <b>24 Cory Lane</b>	
City <b>Reading</b>	State <b>MA</b>	City <b>Reading</b>	State <b>MA</b>
Zip <b>01867</b>		Zip <b>01867</b>	
Director Name <b>Cynthia Sullivan</b>		Director Name <b>[REDACTED]</b>	
Street Address <b>24 Cory Lane</b>		Street Address <b>[REDACTED]</b>	
City <b>Reading</b>	State <b>MA</b>	City <b>[REDACTED]</b>	State <b>[REDACTED]</b>
Zip <b>01867</b>		Zip <b>[REDACTED]</b>	
9. Shares Authorized			
This information is currently of record in the Department of State.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
Changes require an additional filing.		NUMBER OF SHARES <b>50,000</b>	CLASS/SERIES <b>CNP</b>
		PAR VALUE <b>\$0</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. <b>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.</b>			
Name of Authorized Representative <b>Lee Sullivan</b>		Date <b>04/01/2022</b>	
Signature of Authorized Representative <i>Lee Sullivan</i>		DocuSigned by: <b>Lee Sullivan</b>	

**FILED**

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

APR 21 2022

BY *[Signature]* 13125  
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