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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation

→ Filing period: February 1 - May 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

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R.I. DEPT. OF STATE
BUS SVCS DIV
2022 OCT 26 A 11:40

1. Entity ID Number	2. Exact name of the Corporation
000155123	Roy Larry Schlein & Associates Incorporated

3. Principal Office Address	City	State	Zip
1903 Kings Hwy, 2nd Flr B	Swedesboro	NJ	08085

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
541330	Consulting Engineer Services
5. State of Incorporation	
NJ	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Susan Elaine Riggs	NA
Street Address: 706 Rachael Drive	Street Address:
City: Mickleton, State: NJ, Zip: 08056	City, State, Zip:
Secretary Name: NA	Treasurer Name: NA
Street Address:	Street Address:
City, State, Zip:	City, State, Zip:

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

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 ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	1000	STK	0.00

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
Susan Elaine Riggs	10-25-22

Signature of Authorized Representative

FILED
OCT 26 2022 1142
BY

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

FORM 630 - Revised: 11/2021