




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

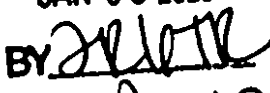
Annual Report for the year: 2022
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2023 JAN -3 P 12:14

1. Entity ID Number 001694429		2. Exact name of the Corporation Brilliant Move, Inc.				
3. Principal Office Address 228 East Rte 59 PMB 403			City Nanuet	State NY	Zip 10954	
4. NAICS Code 541614		6. Brief description of the character of business conducted in Rhode Island Transportation solution for movement of goods				
5. State of Incorporation MA						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name Jean Brillant			Vice-President Name			
Street Address 228 East Rte 59 PMB 403			Street Address			
City Nanuet	State NY	Zip 10954	City	State	Zip	
Secretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name Jean Brillant			Director Name			
Street Address 228 East Rte 59 PMB 403			Street Address			
City Nanuet	State NY	Zip 10954	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized		10. Shares Issued				
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment <input type="checkbox"/>				
		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
		0				0.0010
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 Jean Brillant				Date Apr 15, 2022		
Signature of Authorized Representative 				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

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 FORM 630 - Revised: 10/2017