



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
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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 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2023 JAN 13 P. 3: 09

1. Entity ID Number 1670112		2. Exact name of the Corporation WATUSI INC			
3. Principal Office Address 582 CRANSTON STREET			City PROVIDENCE	State RI	Zip 02907
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island FULL SERVICE RESTAURANT			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name FELIX GARCIA			Vice-President Name		
Street Address 577 CRANSTON STREET			Street Address		
City PROVIDENCE	State RI	Zip 02907	City	State	Zip
Secretary Name			Treasurer Name FELIX GARCIA		
Street Address			Street Address 577 CRANSTON STREET		
City	State	Zip	City PROVIDENCE	State RI	Zip 02907
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name FELIX GARCIA			Director Name		
Street Address 577 CRANSTON STREET			Street Address		
City PROVIDENCE	State RI	Zip 02907	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1,000		STK	0
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 FELIX GARCIA				Date 1/13/2023	
Signature of Authorized Representative 				FILED JAN 13 2023 BY JMB Severz	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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