



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2023**  
**Corporation**

**FILED STAMP**

**JAN 31 2023**

BY **5520**

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

1. Entity ID Number <b>114326</b>		2. Exact name of the Corporation <b>ALLCLEAN, INC.</b>					
3. Principal Office Address <b>210 Conant Street</b>				City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860-0000</b>
4. NAICS Code <b>238990</b>		6. Brief description of the character of business conducted in Rhode Island <b>to engage in the business of fire, smoke and water damage restoration</b>					
5. State of Incorporation <b>RI</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>Rui Pereira</b>			Vice-President Name <b>none</b>				
Street Address <b>210 Conant Street</b>			Street Address <b>none</b>				
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860-</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>		
Secretary Name <b>Rui Pereira</b>			Treasurer Name <b>Rui Pereira</b>				
Street Address <b>210 Conant Street</b>			Street Address <b>210 Conant Street</b>				
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860-</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860-</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>Rui Pereira</b>			Director Name <b>none</b>				
Street Address <b>210 Conant Street</b>			Street Address <b>none</b>				
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860-</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>		
Director Name <b>none</b>			Director Name <b>none</b>				
Street Address <b>none</b>			Street Address <b>none</b>				
City <b>none</b>	State <b>none</b>	Zip <b>none</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>		
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES		PAR VALUE	
			<b>50</b>	<b>Common</b>		<b>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. <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>Rui Pereira</b>  <b>President</b>				Date <b>January 2, 2023</b>			
Signature of Authorized Representative 							

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