State of Rhode Island
Department of State - Business Services Division

FILED
JAN 31 2023
BY 5630

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.

1. Entity ID Number	2. Exact name of the Corporation		
509619	KIDS JUNCTION, INC.		
3. Principal Office Address	City	State	Zip
406 Maple Avenue	Barrington	RI	02806
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island		
624410	Child Daycare		
5. State of Incorporation			
RI			

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

President Name: Julie L. Bianco			Vice-President Name: Julie L. Bianco		
Street Address: 406 Maple Avenue			Street Address: 406 Maple Avenue		
City: Barrington	State: RI	Zip: 02806	City: Barrington	State: RI	Zip: 02806
Secretary Name: Julie L. Bianco			Treasurer Name: Julie L. Bianco		
Street Address: 406 Maple Avenue			Street Address: 406 Maple Avenue		
City: Barrington	State: RI	Zip: 02806	City: Barrington	State: RI	Zip: 02806

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

Director Name: Julie L. Bianco			Director Name: None		
Street Address: 406 Maple Avenue			Street Address:		
City: Barrington	State: RI	Zip: 02806	City:	State:	Zip:
Director Name: None			Director Name: None		
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 ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
50	Common	No Par Value

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
Julie L. Bianco	1/17/2023

Signature of Authorized Representative

X Julie L Bianco

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