



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022 Amended
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

2023 FEB -1 P 3:11

1. Entity ID Number 937896		2. Exact name of the Corporation MIRDESI CO. CORP.	
3. Principal Office Address 114 Doyle Ave.		City Providence	State RI
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island Pizzeria	
5. State of Incorporation MA			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name NUSRET ONER		Vice-President Name Nusret ONER	
Street Address 25 Forest st.		Street Address 25 Forest St	
City Providence	State RI	City Providence	State RI
Secretary Name Nusret ONER		Treasurer Name Nusret ONER	
Street Address 25 Forest st		Street Address 25 Forest St.	
City Providence	State RI	City Providence	State RI
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.		NUMBER OF SHARES	
Changes require an additional filing.		CLASS/SERIES	
		PAR VALUE	
		1,000	
		GNP	
		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 NUSRET ONER		Date 2-1-2023	
Signature of Authorized Representative <i>Nusret Oner</i>		FILED 311	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

BY W3

FORM 630 - Revised: 11/2021