



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

2023

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 FEB - 8 AM '23

1. Entity ID Number 14234		2. Exact name of the Corporation Sterling Cleaners Inc	
3. Principal Office Address 288 Cranston St		City Providence	State RI
4. NAICS Code 812320		6. Brief description of the character of business conducted in Rhode Island Dry Cleaning	
5. State of Incorporation RI		Zip 02907	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Joseph Faella		Vice-President Name John Faella Jr	
Street Address 35 Lauren Ct		Street Address 27 Beechwood Dr	
City Cranston	State RI	City Cranston	State RI
Zip 02921		Zip 02921	
Secretary Name Joseph Faella		Treasurer Name John Faella Jr	
Street Address Same		Street Address Same	
City 	State 	City 	State
Zip 		Zip 	
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
Zip 		Zip 	
Director Name 		Director Name 	
Street Address 		Street Address 	
City 	State 	City 	State
Zip 		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 300	CLASS/SERIES Com
			PAR VALUE None
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 John Faella Jr		Date 2-8-23	
Signature of Authorized Representative <i>[Signature]</i>			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED

FEB 08 2023

BY ML 4BX5H FORM 630 - Revised: 08/2020