State of Rhode Island	Fee: \$50.00				
Office of the Secretary of State	Fee: \$50.00				
Division Of Business Services					
148 W. River Street					
Providence RI 02904-2615 (401) 222-3040					
Business Corporation					
Annual Report					
Filing Period: February 1 - May 1					
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law					
(R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.					
ANNUAL REPORT YEAR: 2023					
1. Corporate ID No. 001340567					
2. Name of Corporation <u>AF INTERNATIONAL, INC.</u>					
3. Street Address Principal Business Office:					
No. and Street: <u>ATLANTIC FOOTCARE</u>					
229 QUAKER HWY					
City or Town: <u>NORTH SMITHFIELD</u> State: <u>RI</u> Zip: <u>02896</u> C	Country: <u>USA</u>				
4. Business Phone No.					
<u>401-568-4918</u>					
5. State of Incorporation					
State: <u>RI</u>					
ARTICLE III					
Enter the six digit NAICS Code that best describes the primary business conducted Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	by the entity.				
<u>316210</u>					
6. Brief Description of the Character of Business Conducted in Rhode Island					
MARKETING AND ADMINISTRATIVE MANAGEMENT SERVICES.					
7. Names and Addresses of the Officers and Directors:					
All officers and directors must be listed. If officers and/or directors have bee title Incorporator is no longer applicable; please delete.	n elected, the				

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KEITH LONERGAN	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA
DIRECTOR	JOHN CARROLL	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA
DIRECTOR	KEN MAZER	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA
DIRECTOR	JANE CARROLL	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA
DIRECTOR	JOHN CONROY	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA
DIRECTOR	KEITH LONERGAN	229 QUAKER HWY NO SMITHFIELD, RI 02896 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	5,000.00	1000

9. 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.

Signed this 15 Day of February, 2023 at 8:29:17 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By KEITH LONERGAN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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