

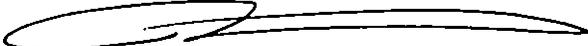


State of Rhode Island  
**Department of State - Business Services Division**

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

**FEB 24 2023**  
*2/24/23*  
**STAMP**  
STATE SECRETARY OF STATE  
 RHODE ISLAND

- 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>000119814</b>		2. Exact name of the Corporation <b>Fire &amp; Emergency Services, Inc.</b>			
3. Principal Office Address <b>P.O. Box 17027</b>			City <b>Esmond</b>	State <b>RI</b>	Zip <b>02917</b>
4. NAICS Code <b>238210</b>		6. Brief description of the character of business conducted in Rhode Island <b>Fire alarm system and emergency lighting testing and related services</b>			
5. State of Incorporation <b>Rhode Island</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>William F. Donahue, IV</b>			Vice-President Name <b>Joseph Izzo</b>		
Street Address <b>26 Silver Spring Street</b>			Street Address <b>27 Carnival Terrace</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
Secretary Name <b>Joseph Izzo</b>			Treasurer Name <b>William F. Donahue, IV</b>		
Street Address <b>27 Carnival Terrace</b>			Street Address <b>26 Silver Spring Street</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</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>William F. Donahue, IV</b>			Director Name <b>Joseph Izzo</b>		
Street Address <b>26 Silver Spring Street</b>			Street Address <b>27 Carnival Terrace</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
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>		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
		NUMBER OF SHARES <b>600</b>	CLASS/SERIES <b>Common</b>	PAR VALUE <b>No Par</b>	
This information is currently of record in the Department of State. Changes require an additional filing.					
Name of Authorized Representative <b>William F. Donahue, IV</b>				Date <b>2/3/23</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