

State of Rhode Island
 Department of State - Business Services Division

Annual Report for the year: 2023
 Incorporation

FILED

MAR 03 2023

BY 5990 DS

- ▶ 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 000150230	2. Exact name of the Corporation Blaine Enterprises Inc
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Principal Office Address 1280 OAKLAWN AVE	City CRANSTON	State RZ	Zip 02920
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NAICS Code 423620	6. Brief description of the character of business conducted in Rhode Island SALES + SERVICE of sewing machines
State of Incorporation RI	

List ALL officers (names and addresses) Check the box to indicate an attachment

President Name Robert ROY	Vice-President Name Korav ROY
Street Address 75 FRANKLIN RD	Street Address same
City CRANSTON State RZ Zip 02920	City _____ State _____ Zip _____
Secretary Name _____	Treasurer Name _____
Street Address _____	Street Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____

List ALL directors (names and addresses) Check the box to indicate an attachment

Director Name _____	Director Name _____
Street Address _____	Street Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Director Name _____	Director Name _____
Street Address _____	Street Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____

Shares Authorized is information is currently of record in the Department of State.	10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>									
Changes require an additional filing.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NUMBER OF SHARES</th> <th style="width: 20%;">CLASS/SENIORS</th> <th style="width: 40%;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1001</td> <td></td> <td style="text-align: center;">.01</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	NUMBER OF SHARES	CLASS/SENIORS	PAR VALUE	1001		.01			
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1001		.01								

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 Robert ROY	Date 2/26/23
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Signature of Authorized Representative