401.222.3040

RISOS Filing Number: 202331230330 Date: 3/14/2023 4:00:00 PM

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* 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(còd)) is subject to a penalty fee of \$25.00

subject to a penalty fee of \$25.00						
1 Corporate ID No	2 Name of Corporation	0 ( ' ( )	1- 15- 1			
112398 Creative Number & Heating Inc						
3. Street Address Principal Business O	Tice Rd	7	CHYNPT	State	02840	
4 Business Phone No 5. State of Incorporation					1.55	
40. 846. 6397 PI						
6 Brief Description of the Character of Business Conducted in Rhode Island						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS						
	OF THE OFFICERS:	("X" BOX FOR ATTAC	. —	ES BEFORE USING ATT	ACHMENTS	
President Name			Vice President Name VOULS - 238720			
HTMU 1ASSO Street Address			110000 - 7000			
7 Cympins Rd			Since Address			
G() () 5T	State	ZΨ 2840	City	State	Zip	
Secretary Name	1 72		Treesa er same 1 2 at 125			
			in the same of the same		<del></del>	
Street Address			Stroet Address			
City	State	Ζψ	City	State	Zip	
0 11114D0 1227			•			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENT						
Director Name Director Name						
Street Address			Count Older			
Sitter Address			Street Address			
City	State	Zifi	City	State	7.0	
•			• ****	wan.	Zφ	
Director Name			Director Name			
Sireet Address			Sirve Address			
Cdy	State	Ζ.φ	City	State	Ζφ	
9. SHARES AUTHORIZED	l	I	In SHADES ISSUED /**	POV FOR ATTACAS	1 T	
			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is surrently of record in the Office of the San			Number of Shares	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of				<del></del>	12 010	
instruction sheet.			1000	Common	NOWK	
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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 repor	
including any accompanying schedules and statements, and that all stateme contained herein are true and correct.						
						File Date
Check No. MAR 1 4 2023						
Check No NIAN 1 1	1 1		Arthus	LASSO		
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FOR SECRETARY OF STA	TE USE ONES		Title		<del></del>	
	-				Form 630 Rev. 08/08	