



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **2023**
CorporationR.I. I
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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 MAR 29 PM 3:24

2023 FEB 27 PM 2:50

1. Entity ID Number 000789809		2. Exact name of the Corporation YUPAS CONSTRUCTION INC			
3. Principal Office Address 447 MASON ST			City WOONSOCKET		State RI
4. NAICS Code 238170		6. Brief description of the character of business conducted in Rhode Island ROOFING & SIDING			
5. State of Incorporation MA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JOSE YUPA			Vice-President Name		
Street Address 34 SOUTH BOW ST			Street Address		
City MILFORD	State MA	Zip 01757	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	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	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		PAR VALUE
			1000	STK C	10.0000
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 JOSE YUPA					Date 02/14/2023
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

FILED
MAR 29 2023
BY DPC73
AA 1:37 pm