



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year: 2023

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

APR 03 2023

BY

1. Entity ID Number 000112409		2. Exact name of the Corporation THE FISH BOWL AQUARIUM AND PETS MART, CO.	
3. Principal Office Address 725 Providence Street		City West Warwick	State RI
		Zip 02893	
4. NAICS Code 311119	6. Brief description of the character of business conducted in Rhode Island To operate and conduct an aquarium and pet store		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Michael A. Marabello, Sr.		Vice-President Name Michael A. Marabello, Jr.	
Street Address 25 Spring Street		Street Address 159 Lakeside Avenue	
City Swansea	State MA	City Cranston	State RI
	Zip 02777		Zip 02910
Secretary Name Michael A. Marabello, Jr.		Treasurer Name Lynn Marabello	
Street Address 159 Lakeside Avenue		Street Address 159 Lakeside Avenue	
City Cranston	State RI	City Cranston	State RI
	Zip 02910		Zip 02910
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Michael A. Marabello, Sr.		Director Name Michael A. Marabello, Jr.	
Street Address 25 Spring Street		Street Address 159 Lakeside Avenue	
City Swansea	State MA	City Cranston	State RI
	Zip 02777		Zip 02910
Director Name Lynn Marabello		Director Name	
Street Address 159 Lakeside Avenue		Street Address	
City Cranston	State RI	City	State
	Zip 02910		Zip
9. Shares Authorized 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.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES 3,000	CLASS/SERIES STK
		PAR VALUE \$0.0000	
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 Michael A. Marabello, Jr.		Date 3/21/23	
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

FORM 630 - Revised: 2/2023