



State of Rhode Island

## Department of State - Business Services Division

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.

FILED TAMP

APR 05 2023

BY

10936  
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1. Entity ID Number 001743147		2. Exact name of the Corporation M.P. Mfg., Inc.	
3. Principal Office Address 136 Mishnock Road		City West Greenwich	State RI
		Zip 02817	
4. NAICS Code 339999	6. Brief description of the character of business conducted in Rhode Island Machine shop		
5. State of Incorporation RHODE ISLAND			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name Joseph Acquarulo		Vice-President Name Ashley Acquarulo	
Street Address 64 Queach Road		Street Address 64 Queach Road	
City Bradford	State CT	City Bradford	State CT
Zip 06405		Zip 06405	
Secretary Name Mary Acquarulo		Treasurer Name Ashley Acquarulo	
Street Address 64 Queach Road		Street Address 64 Queach Road	
City Bradford	State CT	City Bradford	State CT
Zip 06405		Zip 06405	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name Joseph Acquarulo		Director Name Ashley Acquarulo	
Street Address 64 Queach Road		Street Address 64 Queach Road	
City Bradford	State CT	City Bradford	State CT
Zip 06405		Zip 06405	
Director Name Mary Acquarulo		Director Name	
Street Address 64 Queach Road		Street Address	
City Bradford	State CT	City	State
Zip 06405		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		100	COMMON
			NONE
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>			
Name of Authorized Representative JOSEPH ACQUARULO, PRESIDENT		Date 3/31/2023	
Signature of Authorized Representative 			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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