

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.

Handwritten initials

RECEIVED
DEPARTMENT OF STATE
PROVIDENCE, RI
APR 10 2023

1. Entity ID Number 001701679		2. Exact name of the Corporation York Machinery South Inc.		2023 APR 10 P 1:53	
3. Principal Office Address 160 WARREN AVENUE			City WESTBROOK	State ME	Zip 04092
4. NAICS Code 55112		6. Brief description of the character of business conducted in Rhode Island holding company, holding real estate.			
5. State of Incorporation Delaware					
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name YEDIDIA KOSCHITZKY			Vice-President Name		
Street Address 1 YORKDALE ROAD, SUITE 602			Street Address		
City Toronto	State ON	Zip M6A 3A1	City	State	Zip
Secretary Name JOHN ANHANG			Treasurer Name		
Street Address 1 YORKDALE ROAD, SUITE 602			Street Address		
City Toronto	State ON	Zip M6A 3A1	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name YEDIDIA KOSCHITZKY			Director Name JIM MAXWELL		
Street Address 1 YORKDALE ROAD, SUITE 602			Street Address 160 WARREN AVENUE		
City Toronto	State ON	Zip M6A 3A1	City WESTBROOK	State ME	Zip 04092
Director Name JOHN ANHANG			Director Name		
Street Address 1 YORKDALE ROAD, SUITE 602			Street Address		
City Toronto	State ON	Zip M6A 3A1	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		3000		CWP	\$0.0100
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 YEDIDIA KOSCHITZKY				Date 2/27/2023	
Signature of Authorized Representative		DocuSigned by <i>Yedidia Koschitzky</i> APR 10 2023 MD FILED 157 BY VAGIG			