RI SOS Filing Number: 202333447970 Date: 4/20/2023 4:00:00 PM

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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.

| Entity ID Number | 2. Exact nam | 2. Exact name of the Corporation | | | | | |
|--|--------------------|---|---------------------------------|--------|----------------|----------------------------|--|
| 886 | America | American Foam Corporation | | | | | |
| 3. Principal Office Address | | | City | | State | Zip | |
| 61 John Street | | | Johnston | | RI | 02919 | |
| 4. NAICS Code | 6. Brief descr | 6. Brief description of the character of business conducted in Rhode Island | | | | | |
| 313310 | manufact | manufacturing and selling goods made of foam rubber and plastic | | | | | |
| 5. State of Incorporation | | | | | | | |
| Rhode Island | | | | | | | |
| 7. List ALL officers (names and | addresses) | | | Check | the box to i | ndicate an attachment 🔲 | |
| President Name Julius C. Martin | | | Vice-President Name None | | | | |
| Street Address 6 Model Avenue | | | Street Address | | | | |
| ^{City} Warwick | State RI | ^{Zip} 02889 | City | | State | Zip | |
| Secretary Name Eerett A. Marabian, Sr. | | | Treasurer Name Julius C. Martin | | | | |
| Street Address 20 Bentley Road | | | Street Address 6 Model Avenue | | | | |
| ^{City} Warwick | State RI | ^{Zip} 02888 | ^{City} Warwick | | State RI | ^{Zip} 02889 | |
| 8. List ALL directors (names an | d addresses) | | | Check | the box to i | ndicate an attachment | |
| Director Name Everett A. Marabian, Sr. | | | Director Name Julius C. Martin | | | | |
| Street Address 20 Bentley Road | | | Street Address 6 Model Avenue | | | | |
| ^{City} Warwick | State RI | ^{Zip} 02888 | City Warwick | | State RI | ^{Zip} 02889 | |
| Director Name Americo Scungio | | | Director Name None | | | | |
| Street Address 91 Friendship Street | | | Street Address | | | | |
| ^{City} Providence | State RI | ^{Zip} 02903 | City | | State | Zip | |
| 9. Shares Authorized | | 10. Shares Issi | | Check | the box to i | ndicate an attachment | |
| This information is currently of record in the | | | NUMBER OF SHARES | | i | PAR VALUE | |
| Department of State. Changes require an additional fiting. | | 600 | | Common | | no par value | |
| Cuanges require an additional in | mg. | | | | | | |
| 11. This report must be execute trustee, this report must be execute | | | | | ration is in t | the hands of a receiver or | |
| Under penalty of perjury, I de- statements, and that all state | clare and affirm t | hat I have examine | ed this report, i | | panying s | chedules and | |
| Name of Authorized Representa | | | 71. 4 | | Date | _ | |
| Julius C. Martin | Jus (21) | Marlin | Martin 4-3-2023 | | | | |
| Signature of Authorized Repres | entative | y | | | | | |
| | | | | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov