



State of Rhode Island  
**Department of State - Business Services Division**

**STAMP**

**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.

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2023 APR 21 P 2:20

1. Entity ID Number <b>000109212</b>	2. Exact name of the Corporation <b>RAYON EXPRESS &amp; COMMUNICATION INC.</b>
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3. Principal Office Address <b>124 ELMWOOD AVENUE</b>	City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02907</b>
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4. NAICS Code <b>541213</b>	6. Brief description of the character of business conducted in Rhode Island <b>TO PROVIDE INCOME TAX SERVICES</b>
5. State of Incorporation <b>RI</b>	

7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>JEAN E MONDESTIL</b>			Vice-President Name <b>MARIE E MONDESTIL</b>		
Street Address <b>29 ROBIN HOOD ROAD</b>			Street Address <b>29 ROBIN HOOD ROAD</b>		
City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02921</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>JEAN E MONDESTIL</b>			Director Name <b>MARIE E MONDESTIL</b>		
Street Address <b>29 ROBIN HOOD ROAD</b>			Street Address <b>29 ROBIN HOOD ROAD</b>		
City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02921</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	<b>800</b>	<b>STK</b>	<b>0.0100</b>

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 <b>JEAN E MONDESTIL</b>	Date <b>04/19/2023</b>
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Signature of Authorized Representative 
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FILED

APR 21 2023

BY