



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  
STAMP  
APR 26 2023  
BY 11053  
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1. Entity ID Number 511276		2. Exact name of the Corporation Dancin Spirit Performing Arts Group, Inc.			
3. Principal Office Address 40 Fair Oaks Drive			City Lincoln	State RI	Zip 02865
4. NAICS Code 711310		6. Brief description of the character of business conducted in Rhode Island Real Estate Management and Development and Operations of Dance Studio			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Christine Atamian Bairos			Vice-President Name Christine Atamian Bairos		
Street Address 10 Fair Oaks Drive			Street Address 10 Fair Oaks Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Secretary Name Christine Atamian Bairos			Treasurer Name Christine Atamian Bairos		
Street Address 10 Fair Oaks Drive			Street Address 10 Fair Oaks Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
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 Christine Atamian Bairos					Date 3/30/23
Signature of Authorized Representative <i>Christine Bairos</i>					