State of Rhode Island
Department of State - Business Services Division

FILED STAMP

MAY 0 1 2023

BY 3769

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.

1. Entity ID Number	2. Exact name of the Corporation			
001721553	El Zorro Inc.			

3. Principal Office Address	City	State	Zip
137 Swinburne Row	Newport	RI	02840

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
445120	Convenience store
5. State of Incorporation	
RI	

7. List ALL officers (names and addresses)   Check the box to indicate an attachment ☐

President Name	Angel Gonzalez	Vice-President Name	
Street Address	137 Swinburne Row	Street Address	

City Newport	State RI	Zip 02840	City	State	Zip

Secretary Name		Treasurer Name	
Street Address		Street Address	

City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses)   Check the box to indicate an attachment ☐

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		Check the box to indicate an attachment ☐
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	1000	CWP	$1.00
Changes require an additional filing.			

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	Date
Angel Gonzalez	4-28-23
Signature of Authorized Representative	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 2/2023