



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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2023 MAY 16 PM 2:10

2023 APR 26 PM 1:32

1. Entity ID Number <u>000941175</u>		2. Exact name of the Corporation <u>New England Sign Setters Inc</u>	
3. Principal Office Address <u>44 Fishing Cove Rd</u>		City <u>North Kingstown</u>	State <u>RI</u>
4. NAICS Code <u>531390</u>		6. Brief description of the character of business conducted in Rhode Island <u>Real Estate Sign Installation</u>	
5. State of Incorporation <u>RI</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>David Buchner</u>		Vice-President Name	
Street Address <u>77 Baker Way</u>		Street Address <u>SAME</u>	
City <u>North Kingstown</u>	State <u>RI</u>	City	State
Zip <u>02852</u>		Zip	
Secretary Name <u>SAME</u>		Treasurer Name <u>SAME</u>	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.		NUMBER OF SHARES	CLASS/SERIES
Changes require an additional filing.			<u>STK</u>
			<u>\$0.01</u>
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 <u>David Buchner</u>			Date <u>4-21-23</u>
Signature of Authorized Representative <u>[Signature]</u>			FILED

MAY 16 2023

BY HVV2T