



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

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

2023 MAY 17 P 4:12

1. Entity ID Number 1660182		2. Exact name of the Corporation C & E Enterprises, Inc.	
3. Principal Office Address 125 Sockanossett Cross Road		City Cranston	State RI
		Zip 02910	
4. NAICS Code 339910	8. Brief description of the character of business conducted in Rhode Island The Manufacturing of Costume Jewelry		
5. State of Incorporation RHODE ISLAND			
7. List ALL officers (names and addresses)			
President Name Gary Arriaza		Vice-President Name Gary Arriaza	
Street Address 32 Lincoln Drive		Street Address 32 Lincoln Drive	
City Johnston	State RI	City Johnston	State RI
Zip 02919		Zip 02919	
Secretary Name Gary Arriaza		Treasurer Name Gary Arriaza	
Street Address 32 Lincoln Drive		Street Address 32 Lincoln Drive	
City Johnston	State RI	City Johnston	State RI
Zip 02919		Zip 02919	
8. List ALL directors (names and addresses)			
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	
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>	
Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		NONE	COMMON
			NO 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 Gary Arriaza, President		Date 4-26-23	
Signature of Authorized Representative <i>Gary Arriaza</i>		FILED	

MAY 17 2023

BY J

4:12 PM



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

May 17, 2023 04:12 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

