

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2023 JUN 20 PM 2:24



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020

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 001685548		2. Exact name of the Corporation NINA'S TAILORING INC												
3. Principal Office Address 2382 PAWTUCKET AVENUE			City EAST PROVIDENCE	State RI	Zip 02914									
4. NAICS Code 315210		6. Brief description of the character of business conducted in Rhode Island TAILORING												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name GLORIA GUAMAN			Vice-President Name MARIA PINTADO											
Street Address 2382 PAWTUCKET AVENUE			Street Address 2382 PAWTUCKET AVENUE											
City EAST PROVIDENCE	State RI	Zip 02914	City EAST PROVIDENCE	State RI	Zip 02914									
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 <input type="checkbox"/>														
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 <input type="checkbox"/>												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NUMBER OF SHARES</th> <th style="width: 33%;">CLASS/SERIES</th> <th style="width: 33%;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">500</td> <td style="text-align: center;">COMMON</td> <td style="text-align: center;">0.001</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	500	COMMON	0.001			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
500	COMMON	0.001												
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 GLORIA GUAMAN				Date 6-14-23										
Signature of Authorized Representative <i>GLORIA GUAMAN</i>				FILED										

JUN 20 2023

BY 3D9XR
2124DJ