RI SOS Filing Number: 202339854330 Date: 7/27/2023 4:29:00 PM



State of Rhode Island Department of State - Business Services Division

31

2021 Annual Report for the year: **Non-Profit Corporation**

→ Filing period: February 1 - May 1

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. 💊	Donathe	Additional	\$25 AA	faa if form	ie not filad	hy May 1

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

-> Penalty: Additional \$25.00 fee if	form is not filed by	May 31.		301 27 ₽ ₩ 2	1			
Entity ID Number 2. Exact name of the Corporation			2023	JUL Z 1 1 4 E				
001693426	POLISHED GEMs Inc.							
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island							
RI	Training and development organization for the Empowerment of women							
4. NAICS Code and girls of color. Providi			ng access and opportunity to personal					
611000	development, Mentorship, wellness, Travel and entrepreneurship!							
6. Principal Office Address		· .	City	State	Zip			
211 VERMONT AVE			Providence	RI	02905			
7. List ALL officers (names and add	tresses)			eck the box to indicate a				
President Name STERLING A	CLINTON		Vice-President Name Ashley Russell Spellman					
Street Address 211 Vermont A	ve	• • • • • • • • • • • • • • • • • • • •	Street Address 211 Vermont Ave					
^{City} Providence	State RI	^{Zip} 02905	City Providence	State RI	Zip 02905			
Secretary Name Rochelle Clinto	on - Fernende	ez	Treasurer Name Elkinsette Clinton					
Street Address 249 Cunningha		*	Street Address 330 Lake Valley Drive					
^{City} Anniston	State AL	^{Zip} 36201	City Loganville	State RI	^{Zip} 30052			
8. List ALL directors (names and a	ddresses). RI Con	porations MUST I	list at least THREE directors.	heck the box to indicate	an attachment			
Director Name STERLING A C	LINTON		Director Name Ashley Russell Spellman					
Street Address 211 Vermont A			Street Address 211 Vermont Ave					
City Providence	State RI	^{Zip} 02905	City	State	Zip 02905			
Director Name Elkinsette Clinto	on	 	Director Name Rochelle Clinton - Fernendez					
Street Address 330 Lake Valley			Street Address 249 Cunningham Drive					
^{City} Loganville	State GA	^{Zip} 30052	City Anniston	State AL	Zip 36201			
9. The Registered Agent information	on of record with the	ne RI Department	t of State is accurate. Changes	require filing Form 64	1.			
Under penalty of perjury, I decla statements, and that all stateme	re and affirm tha ents contained he	t I have examine erein are true an	ed this report, including any a d correct.	iccompanying sched	dules and			
This report must be signed by either the Pre	sident, Vice-President,	Secretary, Assistant S	Secretary, Treasurer, duly Authorized Re	presentative, Receiver or Tr	ustee.			
Name of Officer/Authorized Repre	sentative			Date				
Sterling A Clinton	1 1	// /	FILED	7/19/202	23			
Signature of Option Authorized Representative JUL 2 7 2023								
	~ \ / //		PV 000 25	Dust				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov