



State of Rhode Island
Department of State - Business Services Division

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.

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

1. Entity ID Number 1694961		2. Exact name of the Corporation NOVA CAULKING INC				2023 AUG 10 A 11:41	
3. Principal Office Address 79 CHURCH GREEN			City TAUNTON		State MA	Zip 02780	
4. NAICS Code 236110		6. Brief description of the character of business conducted in Rhode Island CAULKING AND SEALING SERVICES					
5. State of Incorporation MASSACHUSETTS							
7. List ALL officers (names and addresses)						Check the box to indicate an attachment <input type="checkbox"/>	
President Name MARCELO B BATISTA			Vice-President Name				
Street Address 175 SWAN DR			Street Address				
City EAST TAUNTON	State MA	Zip 02718	City	State	Zip		
Secretary Name MARCELO B BATISTA			Treasurer Name				
Street Address 175 SWAN DR			Street Address 175 SWAN DR				
City EAST TAUNTON	State MA	Zip 02718	City EAST TAUNTON	State MA	Zip 02718		
8. List ALL directors (names and addresses)						Check the box to indicate an attachment <input type="checkbox"/>	
Director Name MARCELO B BATISTA			Director Name				
Street Address 175 SWAN DR			Street Address				
City EAST TAUNTON	State MA	Zip 02718	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.		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
		1000				0	
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 MARCELO B BATISTA					Date 08/09/2023		
Signature of Authorized Representative <i>Marcelo Batista</i>					FILED AUG 10 2023		

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

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