RI SOS Filing Number: 202343310820 Date: 12/12/2023 4:00:00 PM State of Rhode Island **Department of State - Business Services Division** FILED Annual Report for the year: 2024 DEC 12 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. 1. Entity ID Number 2. Exact name of the Corporation 001701324 Dr. DeGiulio & Associates Inc. 3. Principal Office Address City State Zip 13 Capri Drive Johnston RI 02919 4. NAICS Code 6. Brief description of the character of business conducted in Rhode Island 621320 Optomotrist, perform eye examinations, sale of eye wear and any other 5. State of Incorporation purpose permitted by law. Rhode Island 7. List ALL officers (names and addresses) Check the box to indicate an attachment President Name Dr. Lisa DeGiulio Vice-President Name Street Address 13 Capri Drive Street Address State RI City Johnston ^{Zip}02929 City State Zip Secretary Name Treasurer Name Street Address Street Address

City	State	Zip	City		State	. Zip	
8. List ALL directors (names and addresses)	!		Che	ck the box to in	dicate an attachment	
Director Name		Director Name		ON THE BOX TO III	diedie die ditaeriment	<u> </u>	
Street Address		Street Address					
City	State	Zip	City		State	Zıp	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares	Issued	Che	ck the hox to in	dicate an attachment	$\overline{}$
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIFS PAR VALUE			
		25,000		CWP	.01		
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nustee, this report mu	e executed on behalf of the ust be executed on behalf or rjury, I declare and affirm	it the corporation	by the receiver or tr	ustee			ror
<u>statements, and that</u>	<u>t all</u> Statements contained	l herein are true	and correct.		ompanying sci	redules and	
Name of Authorized R	Representative			Date			
Lisa DeGiulio				12 7- 2023			
Signature of Authorize	ed Representative	<u> </u>					
MAIL TO:			_ _				

Division of Business Services

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

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