

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Corporation

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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00 → Penalty: Additional \$2		9.00 						
. Entity ID Number 000153826	2. Exact name CHC, Ltd	of the Corporation						
. Principal Office Address 796 Aquidneck Avenue			City Middletown		State RI	Zip 02842		
NAICS Code 722513 5. State of Incorporation		6. Brief description of the character of business conducted in Rhode Island Coffeehouse and roasting operation						
RI 7. List ALL officers (names a President Name	<u> </u>		Vice-Presid	lent Name	box to indicate a	an attachment 🔲		
Robert Marie Rober	Street Address							
City Middletown	State RI	^{Zip} 02842	City		State	Zıp		
Secretary Name Robert Mastin			Treasurer Name Robert Mastin					
Street Address	Icaria	17:-	Street Add		State	Zip		
City	State	Zip	City State Zip Check the box to indicate an attachment C					
8. List ALL directors (names Director Name	and addresses)		Director N		BOX to indicate	an oraninari		
Street Address			Street Address					
City	State	Zıp	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City		State	Zip		
9. Shares Authorized This information is currently	of record in the	10. Shares Iss	SUED OF SHARES	Check to class/s		PAR VALUE		
Department of State.		10,000	10,000 com			,01		
Changes require an addition					progration is in the	ne hands of a re-		
11. This report must be executive or trustee, this report Under penalty of perjury, statements, and that all series of Authorized Representations.	t must be executed or I declare and affirm statements contained	n behalf of the corp that I have examin	oration by the ned this repo	e receiver or trustee.				
Robert Mastin Signature of Authorized Re	epresentative	<u>. </u>		FILED 11:34	1///	10019		
rolls				N 1 2 70 77				

MAIL TO: **Division of Business Services**

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 18 ZUZ4

FORM 630- Revised: 04/2023