



**State of Rhode Island
Department of State - Business Services Division**

JAN 22 2024

3003702

Annual Report for the year: 2024

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 123289		2. Exact name of the Corporation Edgar, Inc.			
3. Principal Office Address 14 Sullivan Lane			City Bristol	State RI	Zip 02809
4. NAICS Code 3133 315990		6. Brief description of the character of business conducted in Rhode Island Sale of gift itemst to retailers and through EBAY			
5. State of Incorporation NY					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Edgard Berrebbi			Vice-President Name N/A		
Street Address 14 Sullivan Lane			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Secretary Name N/A			Treasurer Name N/A		
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 Edgard Berrebbi			Director Name N/A		
Street Address 14 Sullivan Lane			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Director Name N/A			Director Name N/A		
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			
		200	No par	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 Edgard Berrebbi				Date 1/18/2024	
Signature of Authorized Representative 					