



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:

Corporation _____

JAN 29 2024

01307

- 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 05521		2. Exact name of the Corporation M.F. ENGINEERING COMPANY, INC.	
3. Principal Office Address 7 Peter Road		City Bristol	State RI Zip 02809-0000
4. NAICS Code 332722	6. Brief description of the character of business conducted in Rhode Island manufacturing, screw machine products		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Paul J. Ferreira		Vice President Paul J. Ferreira	
Street Address 38 Anchorage Court		Street Address 38 Anchorage Court	
City Bristol	State RI Zip 02809-	City Bristol	State RI Zip 02809
Secretary Paul J. Ferreira		Treasurer Paul J. Ferreira	
Street Address 38 Anchorage Court		Street Address 38 Anchorage Court	
City BRISTOL	State RI Zip 02809-	City Bristol	State RI Zip 02809
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Paul J. Ferreira		Director Name	
Street Address 38 Anchorage Court		Street Address	
City Bristol	State RI Zip 02809-	City none	State none Zip none
Director None		Director Name	
Street Address none		Street Address	
City none	State none Zip none	City none	State none Zip none
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/SHARES	
		300	Common
			No Par
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 Paul J. Ferreira President			Date 1/04/2024
Signature of Authorized Representative <i>Paul J. Ferreira</i>			

MAIL TO:
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