



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.

REC'D RI SOS 150
24 JAN 31 AM 9:14:13

1. Entity ID Number 000164705		2. Exact name of the Corporation R & S, INC.			
3. Principal Office Address 685 WARWICK AVENUE			City WARWICK		Zip 02886
4. NAICS Code 811111		6. Brief description of the character of business conducted in Rhode Island TO OPERATE A CAR SERVICE REPAIR FACILITY			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name ROBERT ROTONDO			Vice-President Name		
Street Address 685 WARWICK AVE			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
Secretary Name ROBERT ROTONDO			Treasurer Name		
Street Address 685 WARWICK AVE			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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 OF SHARES		
			2000		0.010
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 X Robert Rotondo					Date 1/31/2024
Signature of Authorized Representative X Robert Rotondo					FILED JAN 31 2024

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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