



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

FILED

FEB 06 2024

BY *[Signature]* 2638

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 000126882		2. Exact name of the Corporation Sternlieb Cleaning, Inc	
3. Principal Office Address 82 Hawthorne Avenue PO Box 3782		City Cranston	State RI
		Zip 02910	
4. NAICS Code 561720	6. Brief description of the character of business conducted in Rhode Island Home and office cleaning business		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name Michael Sternlieb		Vice-President Name Michael Sternlieb	
Street Address P.O. Box 3782		Street Address P.O. Box 3782	
City Cranston	State RI	City Cranston	State RI
Zip 02910		Zip 02910	
Secretary Name Michael Sternlieb		Treasurer Name Michael Sternlieb	
Street Address P.O. Box 3782		Street Address P.O. Box 3782	
City Cranston	State RI	City Cranston	State RI
Zip 02910		Zip 02910	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		100 Shares	Common
			No Par Value
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. <b>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.</b>			
Name of Authorized Representative Michael Sternlieb		Date 1/31/2024	
Signature of Authorized Representative <i>Michael Sternlieb</i>			

## MAIL TO:

Division of Business Services

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