



State of Rhode Island
Department of State - Business Services Division

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.

REC'D RIDOS BSD
24 FEB 9 PM 2:56:33

1. Entry ID Number 000690474		2. Exact name of the Corporation ion electric solutions, inc			
3. Principal Office Address 931 Smithfield Avenue			City Lincoln	State RI	Zip 02865
4. NAICS Code 238210		6. Brief description of the character of business conducted in Rhode Island Electrical contracting and installation work including but not limited to Fire Warning and Security Systems.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Charles A. Bishop, Jr.			Vice-President Name		
Street Address 931 Smithfield Avenue			Street Address		
City Lincoln	State RI	Zip 02865	City	State	Zip
Secretary Name Charles A. Bishop, Jr.			Treasurer Name Charles A. Bishop, Jr.		
Street Address 931 Smithfield Avenue			Street Address 931 Smithfield Avenue		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
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		PAR VALUE
			1,000	Common	\$.01
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 Charles A. Bishop, Jr., President					Date 2/5/2024
Signature of Authorized Representative <i>Charles A. Bishop Jr</i>					FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FEB 09 2024
BY ML 000146
FORM 630- Revised 12/2023