

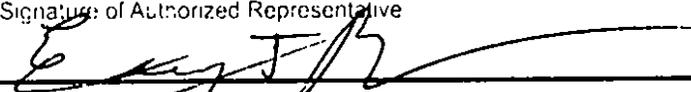


State of Rhode Island
Department of State - Business Services Division

FEB 15 2024
973B *ae*

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 000148049		2. Exact name of the Corporation Bertrand Plumbing, Inc.			
3. Principal Office Address 1295 Jackson Schoolhouse Road			City Pascoag	State RI	Zip 02859
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island To engage in the business of providing plumbing services and all other lawfully related business.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Eugene J. Bertrand			Vice-President Name Karen A. Bertrand		
Street Address 1295 Jackson Schoolhouse Road			Street Address 1295 Jackson Schoolhouse Road		
City Pascoag	State RI	Zip 02859	City Pascoag	State RI	Zip 02859
Secretary Name Eugene J. Bertrand			Treasurer Name Karen A. Bertrand		
Street Address Same			Street Address Same		
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 Eugene J. Bertrand			Director Name		
Street Address Same			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/SERIES	PAR VALUE
		200	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. 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 Eugene J. Bertrand					Date 2/7/24
Signature of Authorized Representative 					

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