	State of Rhode	leland	Fee: \$50.00
	Office of the Secret		
	Division Of Busines	ss Services	
	148 W. River S		
1636	Providence RI 029		
	(401) 222-30	J40	
Foreign Business Corpora Annual Report	tion		
Filing Period: February 1 - May	1		
In accordance with R.I.G.L. 7-1	2-1501(e), each corporatio	n failing or refusing to	,
file its annual report within thirt (R.I.G.L. 7-1.2-1501(c&d)) is su			
ANNUAL REPORT YEAR - EN	ER THE CURRENT YEAR 2	2 024 : <u>2024</u>	
1. Corporate ID No. 00068	4477		
2. Name of Corporation Burr	s Refrigerated Express, Inc	<u>}.</u>	
3. Street Address Principal B	usiness Office:		
No. and Street: <u>501 SE 5</u>	TH STREET		
City or Town: <u>MILFOR</u>	<u>RD</u> State:	<u>DE</u> Zip: <u>19963</u>	Country: <u>USA</u>
4. Business Phone No.			
5. State of Incorporation			
State: <u>DE</u>			
	NAICS CODE		
Enter the six digit NAICS Code	that best describes the prir	nary business conduct	ted by the entity.
Download the list of codes her			
<u>551112</u>			
6. Brief Description of the Ch	aracter of Business Condu	cted in Rhode Island	
TRANSPORTING DELIVE	NG GROCFRV ITFMS		
7. Names and Addresses of t	ne Officers and Directors:		
All officers and directors n	ust be listed.		
Title	Individual Name	Add	Iress
·	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country

PRESIDENT	DONNAN R BURRIS		501 SE 5TH STREET MILFORD, DE 19963 USA		
CFO	DON MCENTAFFER		501 SE 5TH STREET MILFORD, DE 19963 US		
SECRETARY	MARGARET OWENS		501 SE 5TH STREET MILFORD, DE 19963 US		
. Shares Authorized and Is	ssued				
Class of Stock	Series of Stock		alue Per nare	Total Authorized Shares	Total Issued and Outstanding <i>Num of</i>
				Number of Shares	Shares
CNP . This report must be exec		e corpora	-	1,000.00 authorized repres	1000 entative. If
. This report must be exec he corporation is in the	hands of a receiver receiver or trustee. rch, 2024 at 2:56:21 rument constitutes th hat this instrument is the facts stated herei	e corpora or trustee PM. Thu e affirmation	tion by an e, this rep is electron tion or actividual's a	1,000.00 authorized represort must be execut thic signature of the knowledgement of the ct and deed or the d	1000 entative. If ed on behalf individual or he signatory, act and deed

Form No. 630 Revised 09/07

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