



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.

FILED

MAR 12 2024

BY *[Signature]* 122175

1. Entity ID Number 000123318		2. Exact name of the Corporation ENVIRO-CLEAN, INC.												
3. Principal Office Address 41 Cedar Swamp Road			City Smithfield	State RI	Zip 02917									
4. NAICS Code 562910		6. Brief description of the character of business conducted in Rhode Island Mold remediation, cleaning, and restoration services												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Eric S. Anderson			Vice-President Name Erika Dean											
Street Address 66 Wauregan Road			Street Address 28 Worthington Road											
City Brooklyn	State CT	Zip 06234	City New London	State CT	Zip 06320									
Secretary Name Laurie Oates			Treasurer Name Laura Anderson											
Street Address 120 Sandy Brook Road			Street Address 66 Wauregan Road											
City North Scituate	State RI	Zip 02857	City Brooklyn	State CT	Zip 06234									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Eric S. Anderson			Director Name											
Street Address 66 Wauregan Road			Street Address											
City Brooklyn	State CT	Zip 06234	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>C. ASSOCIATES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	C. ASSOCIATES	PAR VALUE	200	Common	No Par Value			
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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 Eric S. Anderson, President				Date 3/6/24										
Signature of Authorized Representative <i>[Signature]</i>														

MAIL TO:

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