



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 15 2024

BY S194
OS

1. Entity ID Number 115831		2. Exact name of the Corporation East Coast Cleaning, Inc.			
3. Principal Office Address 10 West Street			City Warren	State RI	Zip 02885
4. NAICS Code 561720		6. Brief description of the character of business conducted in Rhode Island To engage in any and all lawful business activity and to engage in cleaning and maintenance services			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Douglas Jahnke			Vice-President Name Christin Jahnke		
Street Address 10 West Street			Street Address 10 West Street		
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885
Secretary Name Christin Jahnke			Treasurer Name Douglas Jahnke		
Street Address 10 West Street			Street Address 10 West Street		
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Douglas Jahnke			Director Name		
Street Address 10 West Street			Street Address		
City Warren	State RI	Zip 02885	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			1500		Common
					PAR VALUE
					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. <i>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.</i>					
Name of Authorized Representative Douglas Jahnke					Date 2/26/24
Signature of Authorized Representative 					

MAIL TO:
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