



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
STAMP
MAR 18 2024
BY 1167
[Signature]

1. Entity ID Number 152764		2. Exact name of the Corporation Y & S Sales & Marketing, Inc.			
3. Principal Office Address 647 Jefferson Blvd			City Warwick	State RI	Zip 02886
4. NAICS Code 54110		6. Brief description of the character of business conducted in Rhode Island Sales			
5. State of Incorporation Maine					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name John Stinson			Vice-President Name John Stinson		
Street Address 647 Jefferson Blvd			Street Address same		
City Warwick	State RI	Zip 02886	City	State	Zip
Secretary Name John Stinson			Treasurer Name John Stinson		
Street Address same as above			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			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		CLASS/SERIES	PAR VALUE
		1000			none
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 John Stinson					Date 3/2/24
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:
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