RI SOS Filing Number: 202449316870 Date: 3/20/2024 4:00:00 PM

State of Rhode Island

| Department of St   | ate - Busine  | ss Services I                   | Division                        |   |                      | •            |              |  |
|--|---|---------------------------------|---------------------------------|---|----------------------|--------------|--------------|--|
| Annual Report for the year: Corporation  |   |                                 |                                 |   | MAR 2 0 2024<br>5243 |              |              |  |
| <ul> <li>→ Filing period: February 1 - May 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by May 31</li> </ul> |   |                                 |                                 | 5243  |                      |              |              |  |
| 1. Entity ID Number  | 2 Exact name  | of the Corneration              |                                 |   |                      |              |              |  |
| 19728  | 2. Exact name of the Corporation William Leo & Sons, Inc.                   |                                 |                                 |   |                      |              |              |  |
| Principal Office Address   | TVIIII E  | - CO & CONS, 1                  |                                 |   | 101 .                |              |              |  |
| 115 Onset Street   |   |                                 | City<br>Warwick                 |   | State<br>RI          |              | Zip<br>02886 |  |
| 4. NAICS Code  | 6. Brief description of the character of business conducted in Rhode Island |                                 |                                 |   |                      |              |              |  |
| 541990 5. State of Incorporation   | Cleaning and sanitizing liquid container truck carriers                     |                                 |                                 |   |                      |              |              |  |
| RI   |   |                                 |                                 |   |                      |              |              |  |
| 7. List ALL officers (names and addresses) President Name  |   |                                 |                                 | Check the bex to indicate an attachment       |                      |              |              |  |
| James J. Leo   |   |                                 |                                 | Vice-President Name Susanne Marie Connors-Leo |                      |              |              |  |
| Street Address 115 Onset Street  |   |                                 |                                 | Street Address 115 Onset Street               |                      |              |              |  |
| <sup>City</sup> Warwick  | State RI  | <sup>Z<sub>IP</sub></sup> 02888 | City Warwick                    |   | State                | RI           | Zip<br>02888 |  |
| Secretary Name Susanne Marie Connors-Leo   |   |                                 |                                 | Treasurer Name James J. Leo                   |                      |              |              |  |
| Street Address 115 Onset Street  |   |                                 | Street Address 115 Onset Street |   |                      |              |              |  |
| <sup>City</sup> Warwick  | State RI  | <sup>Zip</sup> 02888            | City Warwick                    |   | State                | RI           | Zip<br>02888 |  |
| List ALL directors (names and ac<br>Director Name  | ddresses)   |                                 | In:                             | Check the                                     | box to ind           | cate an att  | achment      |  |
| James J. Leo   |   |                                 |                                 | Director Name Susanne Marie Connors-Leo       |                      |              |              |  |
| Street Address 115 Onset Street  |   |                                 |                                 | Street Address 115 Onset Street               |                      |              |              |  |
| City Warwick Director Name   | State RI  | <sup>Zıp</sup> 02888            | <sup>City</sup> Warwick         |   | State                | RI           | Zip<br>02888 |  |
| Street Address   |   |                                 |                                 | Director Name                                 |                      |              |              |  |
|  |   |                                 | Street Address                  |   |                      |              |              |  |
| City   | State   | Zip                             | City                            |   | State                |              | Zip          |  |
| 9. Shares Authorized This information is currently of recor  | ed  | Check the                       | e box to ind                    | icate an att                                  |                      |              |              |  |
| Department of State.  Changes require an additional filing.  |   | NUMBER OF SHARES                |                                 | A Common                                      |                      | No par value |              |  |
|  |   | 5972                            |                                 |   | nmon                 |              | No par value |  |
| 11. This report must be executed or ceiver or trustee, this report must be   | e executea on be  | thaif of the corpora            | tion by the i                   | receiver or tructon                           |                      |              |              |  |
| onder penalty of perjury, I declar<br><u>statements, and</u> that all statemer   | e and affirm tha<br>its contained he  | t I have examined               | this repor                      | t, including any acc                          | ompanying            | schedule     | s and        |  |
| Name of Authorized Representative  James J. Leo  |   |                                 |                                 |   | Date 3-11-2024       |              |              |  |
| Signature of Authorized Representa   | give  | 1 4                             |                                 | <del></del>                                   |                      |              |              |  |
| MAIL TO:   | Janus,  | y. 200                          | <del>_</del>                    |   |                      |              |              |  |
| Division of Business Services  | \   | ,                               |                                 |   |                      |              |              |  |

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov