



State of Rhode Island  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Business Corporation  
Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - **ENTER THE CURRENT YEAR 2024:** 2024

1. Corporate ID No. 001753321

2. Name of Corporation Dimension Home Improvement Corp.

3. Street Address Principal Business Office:

No. and Street: 31 LAUREL STREET

City or Town: LOWELL

State: MA

Zip: 01852

Country: USA

4. Business Phone No.

(978) 788-3233

5. State of Incorporation

State: MA

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

236118

6. Brief Description of the Character of Business Conducted in Rhode Island

CONSTRUCTION AND HOME IMPROVEMENT

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

| Title | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-------|------------------------------------------------|------------------------------------------------------------|
|-------|------------------------------------------------|------------------------------------------------------------|

|           |                                  |                                          |
|-----------|----------------------------------|------------------------------------------|
| PRESIDENT | SIDNEI PAULO DOS SANTOS<br>LEITE | 31 LAUREL STREET<br>LOWELL, MA 01852 USA |
|-----------|----------------------------------|------------------------------------------|

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per<br>Share | Total Authorized<br>Shares<br><i>Number of Shares</i> | Total Issued<br>and<br>Outstanding<br><i>Num of<br/>Shares</i> |
|----------------|-----------------|------------------------|-------------------------------------------------------|----------------------------------------------------------------|
| CNP            |                 | \$0.0000               | 100.00                                                | 0                                                              |

9. 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.

Signed this 21 Day of March, 2024 at 4:25:55 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By SIDNEI P. LEITE  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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