

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.

APR 08 2024

2082

1. Entity ID Number 000146744		2. Exact name of the Corporation H G HOME IMPROVEMENTS, INC.			
3. Principal Office Address 58 POND ROAD			City CUMBERLAND	State RI	Zip 02864
4. NAICS Code 238300		6. Brief description of the character of business conducted in Rhode Island CONSTRUCTION - REMODELIN			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name HENRYK GWOZDZ			Vice-President Name HENRYK GWOZDZ		
Street Address 58 POND ROAD			Street Address 58 POND ROAD		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
Secretary Name HENRYK GWOZDZ			Treasurer Name HENRYK GWOZDZ		
Street Address 58 POND ROAD			Street Address 58 POND ROAD		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
8. List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name HENRYK GWOZDZ			Director Name		
Street Address 58 POND ROAD			Street Address		
City CUMBERLAND	State RI	Zip 02864	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		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SEIRLS		
			PAR VALUE		
			100		
			COMMON		
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 Henryk Gwozd					Date 4/23/24
Signature of Authorized Representative HENRYK GWOZDZ					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov