



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.

REC'D RI SOS BSD
24 APR 17 PM 2:23:14

1. Entity ID Number 000133109		2. Exact name of the Corporation Action Energy Services, Inc.			
3. Principal Office Address 2447 Pawtucket Ave			City East Providence		State RI
			Zip 02914-4158		
3. NAICS Code 238900		4. Brief description of the character of business conducted in Rhode Island Paint Contractor			
5. State of Incorporation R					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jorge Amaral			Vice-President Name Jorge Amaral		
Street Address PO Box14158			Street Address PO Box14158		
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
Secretary Name Jorge Amaral			Treasurer Name Jorge Amaral		
Street Address PO Box14158			Street Address PO Box14158		
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914
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		
			100	Common	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.					
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 Jorge Amaral					Date 4-2-24
Signature of Authorized Representative 					FILED APR 17 2024 4862 PS