



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Corporation

2024

- 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 RIDOS B30
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1. Entity ID Number 1715482		2. Exact name of the Corporation AAA Garcia Distribution inc			
3. Principal Office Address 69 Diaz St		City Johnston		State RI	Zip 02919
4. NAICS Code 424490		6. Brief description of the character of business conducted in Rhode Island Bread distributor			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Genesis G Almonte			Vice-President Name		
Street Address 69 Diaz St			Street Address		
City Johnston	State RI	Zip 02919	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
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 This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			0 0 0		
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 Genesis Almonte				Date 04/23/2024	
Signature of Authorized Representative Genesis A					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED 430

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FORM 630- Revised. 12/2023

BY

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