



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 RIDOS BSD
24 APR 30 AM 9:18:43

1. Entity ID Number 151545		2. Exact name of the Corporation Affordable Insulation												
3. Principal Office Address 22 Dudley St			City Pawtucket	State RI	Zip 02860									
4. NAICS Code 238290		6. Brief description of the character of business conducted in Rhode Island Insulation												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment														
President Name Amandio C. Fernandes			Vice-President Name _____											
Street Address 13 Hobson Ave			Street Address _____											
City Rehoboth	State MA	Zip 02769	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														
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												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NUMBER OF SHARES</th> <th style="width: 40%;">CLASS/SERIES</th> <th style="width: 20%;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">100</td> <td></td> <td style="text-align: center;">0.01</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100		0.01			
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		100		0.01										
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 ✓ AMANDIO FERNANDES				FILED	Date 4/24/24									
Signature of Authorized Representative 														

APR 30 2024

BY **Jgdw**