



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.

FILED P

MAY 07 2024

BY

1. Entity ID Number 001735666	2. Exact name of the Corporation VIVIX, INC
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3. Principal Office Address 549 BROAD STREET	City PROVIDENCE	State RI	Zip 02905
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4. NAICS Code 722511	6. Brief description of the character of business conducted in Rhode Island RESTAURANT & LOUNGE
5. State of Incorporation RHODE ISLAND	

7. List ALL officers (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>			
President Name JESUS TITIN				Vice-President Name SAME			
Street Address 549 BROAD STREET				Street Address			
City PROVIDENCE	State RI	Zip 02907	City	State	Zip		
Secretary Name SAME				Treasurer Name SAME			
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 JESUS TITIN				Director Name SAME			
Street Address 549 BROAD STREET				Street Address			
City PROVIDENCE	State RI	Zip 02907	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.	NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
	75,000	CNP			\$0.0000
Changes require an additional filing.					

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 JESUS TITIN	Date 12/08/2023
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Signature of Authorized Representative  
*Jesus Titin*