| | Ctote of Dhode | lelend | Fee: \$50.00 | | | | |
|--|---|-----------------------------------|---------------------|--|--|--|--|
| | State of Rhode Office of the Secreta | | ree: \$50.00 | | | | |
| | Division Of Busines | - | | | | | |
| | 148 W. River S | street | | | | | |
| | Providence RI 029 | | | | | | |
| 1630 | (401) 222-30 | 140 | | | | | |
| Foreign Business Corpora | tion | | | | | | |
| Annual Report Filing Period: February 1 - May | 1 | | | | | | |
| In accordance with PIGL 7-1 | 2-1501(a) each corporation | n failing or refusing to | | | | | |
| In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law | | | | | | | |
| (R.I.G.L. 7-1.2-1501(c&d)) is su | bject to a penalty fee of \$25 | .00. | | | | | |
| ANNUAL REPORT YEAR - EN | ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024 : <u>2024</u> | | | | | | |
| 1. Corporate ID No. 00166 | 55888 | | | | | | |
| 2. Name of Corporation PYROTECNICO FIREWORKS, INC. | | | | | | | |
| 3. Street Address Principal B | usiness Office: | | | | | | |
| No. and Street: 10 GREAT | Г WOODS ROAD | | | | | | |
| City or Town: EAST HA | | nte: <u>M A</u> Zip: <u>02645</u> | Country: <u>USA</u> | | | | |
| 4. Business Phone No. | | | | | | | |
| 4. Business Filone No. | | | | | | | |
| | | | | | | | |
| 5. State of Incorporation | | | | | | | |
| State: <u>PA</u> | | | | | | | |
| | | | | | | | |
| | NAICS CODE | | | | | | |
| Enter the six digit NAICS Code | · · · · · | • | | | | | |
| ownload the list of codes her | Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. | | | | | | |
| <u>531120</u> | | | | | | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island | | | | | | | |
| | | | | | | | |
| ENTEDTA INMENT DOODUCTIONS | | | | | | | |
| ENTERTAINMENT PRODUCTIONS | | | | | | | |
| 7. Names and Addresses of the Officers and Directors: | | | | | | | |
| All officers and directors must be listed. | | | | | | | |
| All officers and directors n | nust be listed. | | | | | | |
| All officers and directors n | nust be listed. Individual Name | Addı | ess | | | | |

| PRESIDENT | STEPHEN J. VITALE | 299 WILSON ROAD NEW CASTLE, PA 16101 USA |
|-----------|-------------------|---|
| TREASURER | MARK DEVINCENTIS | 299 WILSON ROAD NEW CASTLE, PA 16101 USA |
| SECRETARY | LYNN HAMED | 299 WILSON ROAD NEW CASTLE, PA 16101 USA |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares Number of Shares | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> |
|----------------|-----------------|------------------------|--|--|
| STK | В | \$0.0000 | 80,000.00 | 0 |
| STK | A | \$0.0000 | 20,000.00 | 0 |

9. 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.

Signed this 9 Day of May, 2024 at 10:19:12 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By STEFANIE A. MURPHY

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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