



State of Rhode Island
Department of State - Business Services Division

REC'D RIDGS BSD
MAY 28 AM 10:48
2024

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.

1. Entity ID Number 001752277		2. Exact name of the Corporation Gala Photo Booths, Inc.			
3. Principal Office Address 751 Main Street			City West Warwick	State RI	Zip 02893
4. NAICS Code 541921		6. Brief description of the character of business conducted in Rhode Island Photo booth services			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Joshua Chopy			Vice-President Name Zachary Deus		
Street Address 751 Main St			Street Address 751 Main St		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
Secretary Name Zachary Deus			Treasurer Name Joshua Chopy		
Street Address 751 Main St			Street Address 751 Main St		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name NONE			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		PAR VALUE
			2000	Common	No Par
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 Joshua Chopy					Date 05/28/2024
Signature of Authorized Representative 					

MAY 28 2024
BY 1370

MAIL TO:
Division of Business Services
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