	State of Rhode Island	Fee: \$50.00					
	Division Of Business Services						
	148 W. River Street						
1636	Providence RI 02904-2615						
.030	(401) 222-3040						
Business Corpora Annual Report	ation						
Filing Period: Februa	ry 1 - May 1						
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 subject to a penalty fee of \$25.00.							
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024							
1. Corporate ID No. 001751910							
2. Name of Corporation Painter's Plus, Inc.							
3. Street Address P	Principal Business Office:						
No. and Street:	<u>101 FARNUM PIKE</u> APT 4						
City or Town:	<u>SMITHFIELD</u> State: <u>RI</u> Zip: <u>02917</u>	Country: <u>US</u>					
4. Business Phone	No.						
<u>954-861-8016</u>							
5. State of Incorport	ation						
State: <u>RI</u>							
	NAICS CODE						
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.							
<u>238320</u>							
6. Brief Description of the Character of Business Conducted in Rhode Island							
EXECUTE PAINTING OF SUBSTRATE SURFACES INTERIOR AND EXTERIOR OF							
RESIDENTIAL							
AND COMMERC	IAL BUILDINGS.						
7. Names and Addresses of the Officers and Directors:							

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
INCORPORATOR	ALBERT ANTONELLI	5A GOUSE TRAIL SMITHFIELD, RI 02917 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	, °,
			Shares	Num of
			Number of Shares	Shares
STK		\$1.0000	600.00	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 29 Day of May, 2024 at 10:30:00 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 ALBERT ANTONELLI

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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