

State of Rhode Island

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS ON

Annual Report for the year: 2024

Corporation

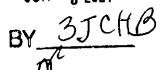
Filing period: February 1 - May 1

→ Filing Fee: \$50.00 → Penalty: Additional \$2	5.00 fee if form is n	ot filed by May 31.		1.2024 JUN -	3 PM 2: 18		
1. Entity ID Number 001695386	2. Exact nam	2. Exact name of the Corporation SPIKES TOOL BOX INC					
3. Principal Office Address 2160 HARKNEY HILL RD			City COVE	NTRY	State RI	Zip 02816	
4. NAICS Code 454390 5. State of Incorporation RI		Brief description of the character of business conducted in Rhode Island RETAIL TOOL SALES					
7. List ALL officers (names a	nd addresses)	·		Check	the box to indicate	e an attachment	
President Name JEREMY	Vice-Presid	Vice-President Name JEREMY WEBBER					
Street Address 2160 HARKNEY HILL RD				Street Address			
City COVENTRY	State RI	^{Zip} 02816	City	.	State	Zip	
Secretary Name JEREMY WEBBER			Treasurer	Treasurer Name JEREMY WEBBER			
Street Address			Street Address				
City	State	Zip	City		State	Zıp	
8. List ALL directors (names	and addresses)			Check	the box to indicat	e an attachment 🗆	
Director Name			Director Na				
Street Address			Street Add	ress			
City	State	Zip	City		State	Zip	
Director Name			Director Name				
Street Address	Street Add	Street Address					
City	State	Zip	City		State	Zip	
9. Shares Authorized	<u> </u>	10. Shares Iss	sued	Check	L L L L L L L L L L L L L L L L L L L	I te an attachment □	
This information is currently of record in the		NUMBER ()	NUMBER OF SHARES		CLASS/SERIES PAR VALUE		
Department of State. Changes require an additional filing.		10,000		CWP).	.01	
 This report must be exected ceiver or trustee, this report 						he hands of a re-	
Under penalty of perjury, I	declare and affirm	that I have examin	ned this repo			chedules and	
<u>statements, and that all statements contained herein are true and correct.</u> Name of Authorized Representative					Date		
JEREMY WEBBER		05/30/24					
Signature of Authorized Rep	resentative		FILED				

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 630- Revised: 12/2023