



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.

JUN 07 2024

192

STAMP

1. Entity ID Number 000688933		2. Exact name of the Corporation RITACCO, INC												
3. Principal Office Address 336 ATWELLS AVENUE			City PROVIDENCE	State RI	Zip 02903									
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island RESTAURANT												
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 DONNY SANCHEZ			Vice-President Name SAME											
Street Address 81 SACKETT 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 DONNY SANCHEZ			Director Name											
Street Address 81 SACKETT 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. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100.00</td> <td>STK</td> <td>\$0.0100</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100.00	STK	\$0.0100			
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100.00	STK	\$0.0100												
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. <i>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.</i>														
Name of Authorized Representative DONNY SANCHEZ					Date 12/01/2023									
Signature of Authorized Representative 														