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State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023  
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<br><u>56792</u>   |                      | 2. Exact name of the Corporation<br><u>A&amp;N Jewelry Co. INC.</u>  |   |                                     |                        |
| 3. Principal Office Address<br><u>22 First St.</u>  |                      |  | City<br><u>E. Providence</u>              | State<br><u>R.I.</u>                | Zip<br><u>02914</u>    |
| 4. NAICS Code<br><u>423940</u>  |                      | 6. Brief description of the character of business conducted in Rhode Island<br><u>Jewelry sub-Contractor</u> |   |                                     |                        |
| 5. State of Incorporation<br><u>Rhode Island</u>  |                      |  |   |                                     |                        |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                      |  |   |                                     |                        |
| President Name<br><u>Dianne Elmekaw</u>   |                      |  | Vice-President Name<br><u>NONE</u>        |                                     |                        |
| Street Address<br><u>20 Cindy Lane</u>  |                      |  | Street Address                            |                                     |                        |
| City<br><u>Cranston</u>   | State<br><u>R.I.</u> | Zip<br><u>02921</u>  | City                                      | State                               | Zip                    |
| Secretary Name<br><u>Dianne Elmekaw</u>   |                      |  | Treasurer Name<br><u>Mekaw E. Elmekaw</u> |                                     |                        |
| Street Address<br><u>20 Cindy Lane</u>  |                      |  | Street Address<br><u>20 Cindy Lane</u>    |                                     |                        |
| City<br><u>Cranston</u>   | State<br><u>R.I.</u> | Zip<br><u>02921</u>  | City<br><u>Cranston</u>                   | State<br><u>R.I.</u>                | Zip<br><u>02921</u>    |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                      |  |   |                                     |                        |
| Director Name<br><u>NONE</u>  |                      |  | 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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                      |  |   |                                     |                        |
| This information is currently of record in the Department of State.   |                      | NUMBER OF SHARES<br><u>10</u>  |   | CLASS/SERIES<br><u>No par value</u> |                        |
| Changes require an additional filing.   |                      |  |   | PAR VALUE                           |                        |
| 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. |                      |  |   |                                     |                        |
| <b>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.</b>                                       |                      |  |   |                                     |                        |
| Name of Authorized Representative<br><u>Mekaw E. Elmekaw</u>  |                      |  | FILED <u>200</u>                          |                                     | Date<br><u>2/21/24</u> |
| Signature of Authorized Representative<br><u>M. Elmekaw</u>   |                      |  | JUL 03 2024<br>BY <u>VFAFN</u>            |                                     |                        |

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