



State of Rhode Island
Department of State - Business Services Division

FILED 3/25/24
RET. # 07JQZ

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 001695127		2. Exact name of the Corporation ELNATAN PROFESSIONAL INSTALLATION INC			
3. Principal Office Address 28 HEALTH AVE		City PROVIDENCE		State RI	Zip 02909
4. NAICS Code 811411	6. Brief description of the character of business conducted in Rhode Island LANDSCAPING AND CONSTRUCTION SERVICES				
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 LUCAS CHACH		Vice-President Name			
Street Address 28 HEALTH AVENUE		Street Address			
City PROVIDENCE	State RI	Zip 02909	City	State	Zip
Secretary Name		Treasurer Name			
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		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	
		0			
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 LUCAS CHACH				Date 03/25/2024	
Signature of Authorized Representative <i>Lucas Chach Moreno</i>					

MAIL TO:
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