RI SOS Filing Number: 202458926590 Date: 8/19/2024 1:03:00 PM

State of Rhode Island
Department of State - Business Services Division

RECD RIDOS BSD '24 AUG 19 PM 12:59:30

Annual Report for the year: 2021
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	2. Exact name of the Corporation			
000694060	Shop and Go inc			
3. Principal Office Address		City	State	Zip
216 Union Ave		Providence	RI	02904
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
624210	convenience store			
5. State of Incorporation				
RI				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
Kalida Solomon					
Street Address			Street Address		
216 Union Ave					
City	State	Zip	City	State	Zip
Providence	RI	02904			
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 ☐

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 ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	100	STK	$0.000

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	Date
Kalida Solomon	8/19/24
Signature of Authorized Representative	
K. Solomon	**FILED**

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

1:03PM AUG 19 2024
BY 073PK