



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
Corporation

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

REC'D RI SOS BSD
24 DEC 13 PM 4:33:13

1. Entity ID Number 001765596		2. Exact name of the Corporation Pilsen Transportation Inc			
3. Principal Office Address 408 HIGH STREET			City CENTRAL FALLS	State RI	Zip 02863
4. NAICS Code 484121		6. Brief description of the character of business conducted in Rhode Island General freight trucking			
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 MARCO A HERRERA CALDERON			Vice-President Name		
Street Address 408 HIGH STREET			Street Address		
City CENTRAL FALLS	State RI	Zip 02863	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/STYLES	
		10,000,000		PWP	
				PAR VALUE	
				0.01	
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 MARCO A HERRERA					Date 12/13/24
Signature of Authorized Representative 					