RI SOS Filing Number: 202562766530 Date: 1/16/2025 4:02:00 PM

State of Rhode Island Department of State - Business Services Division					ं हैं इन्हें 147,	실용 많은 STAMP	
Annual Report for the year: 2008						1	
Corporation					E	A 6 4	
→ Filing period: February 1 - May 1 → Filing Fee: \$50.00) (,	
→ Penalty: Additional \$25.00					<u>'r</u>		
Entity ID Number		e of the Corporation					
000060593	Smith ar	nd Company	Mainten	ance Inc			
Principal Office Address Morgan Street			City Newpo	ort	State RI	Z _{IP} 02840	
4. NAICS Code	Brief description of the character of business conducted in Rhode Island						
561720	JANITOR	JANITORIAL SERVICE					
5. State of Incorporation	TITLE: 7-1.1-51						
RI	11122.7	01					
7. List ALL officers (names and addresses)				Check the box to indicate an attachment			
President Name William Smith			Vice-President Name				
Street Address 12 Morgan Street			Street Address				
City Newport	State RI	^{Zip} 02840	City		State	Zıp	
Secretary Name			Treasurer Name				
Street Address			Street Address				
City	State	Zıp	City		State	Zip	
8. List ALL directors (names and	addresses)				the box to indic	cate an attachment	
Director Name				Director Name			
Street Address			Street Address				
City	State	Zip	City		State	State Zip	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Issu				cate an attachment PAR VALUE	
This information is currently of record in the Department of State.		O NOMBER OF	NUMBER OF SHARES				
Changes require an additional filing	3.			CNP		40.00	
11. This report must be executed	on behalf of the	corporation by an ai	uthorized ren	I presentative. If the	comoration is i	n the hands of a re-	
ceiver or trustee, this report must	be executed on	behalf of the corpor	ation by the i	receiver or trustee.			
Under penalty of perjury, I deci- statements, and that all statem				t, including any a FILED	ccompanying	schedules and	
Name of Authorized Representative Date						1	
William Smith				IAN 16 2025	1/16	25	
Signature of Authorized Representative BY QUUTT							
MAIL TO: Division of Business Services	4- 1-1 6000 4 00		41	20	KI		

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov