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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.

1. Entity ID Number	2. Exact name of the Corporation		
000008175	Sandberg Enterprises Inc		
3. Principal Office Address	City	State	Zip
806 Bronco Hwy	Mapleville	RI	02839
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island		
332710	Machine shop		
5. State of Incorporation			
RI			

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

President Name	Vice-President Name
Donald Sandberg	Bruce Sandberg
Street Address: 330 Ledge Rd	Street Address: 23 Peck Hill Rd
City: Dayville, State: CT, Zip: 06241	City: Johnston, State: RI, Zip: 02919
Secretary Name: Donald	Treasurer Name: Bruce
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
Robert Sandberg Sr	Dorothy Sandberg
Street Address: 23 Peck Hill Rd	Street Address: 23 Peck Hill Rd
City: Johnston, State: RI, Zip: 02919	City: Johnston, State: RI, Zip: 02919
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. Changes require an additional filing.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	600		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	Date
Donald Sandberg	1/20/2025

Signature of Authorized Representative

FILED
JAN 23 2025
BY EMSFA
AA. 3:03pm.

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

FORM 650- Revised 12/2023