



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 RIDOS BSD
JAN 23 PM 3:01:10

1. Entity ID Number 000008175		2. Exact name of the Corporation Sandberg Enterprises Inc			
3. Principal Office Address 806 Bronco Hwy		City Mapleville		State RI	Zip 02839
4. NAICS Code 332710		6. Brief description of the character of business conducted in Rhode Island Machine shop			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Donald Sandberg			Vice-President Name 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 Robert Sandberg Sr			Director Name 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 Donald Sandberg				Date 1/20/2025	
Signature of Authorized Representative 					

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

FILED
JAN 23 2025
BY EM SFA
AA 3:03pm
FORM 650- Revised 12/2023