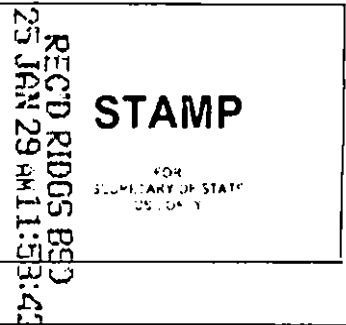




State of Rhode Island
Department of State - Business Services Division

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 001008486			2. Exact name of the Corporation Corsetti and Associates, Inc.		
3. Principal Office Address 144 Wayland Avenue			City Providence	State RI	Zip 02906
4. NAICS Code 541211		6. Brief description of the character of business conducted in Rhode Island accounting services			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Louis A. Corsetti			Vice-President Name Mary Ellen Corsetti		
Street Address 144 Wayland Avenue			Street Address 144 Wayland Avenue		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Louis A. Corsetti			Treasurer Name Louis A. Corsetti		
Street Address 144 Wayland Avenue			Street Address 144 Wayland Avenue		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			Common Shares		
			0.01 par value		
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 Louis A. Corsetti				Date 1/22/25	
Signature of Authorized Representative				FILED	

JAN 29 2025

BY 2656
AC