



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.

FILED

FEB 06 2025

BY 1892
AA

1. Entity ID Number 001743147		2. Exact name of the Corporation M.P. Mfg., Inc.			
3. Principal Office Address 64 Queach Road			City Bradford	State CT	Zip 06405
4. NAICS Code 339999	6. Brief description of the character of business conducted in Rhode Island Machine shop				
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 Joseph Acquarulo			Vice-President Name Ashley Acquarulo		
Street Address 64 Queach Road			Street Address 64 Queach Road		
City Bradford	State CT	Zip 06405	City Bradford	State CT	Zip 06405
Secretary Name Mary Acquarulo			Treasurer Name Ashley Acquarulo		
Street Address 64 Queach Road			Street Address 64 Queach Road		
City Bradford	State CT	Zip 06405	City Bradford	State CT	Zip 06405
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Joseph Acquarulo			Director Name Ashley Acquarulo		
Street Address 64 Queach Road			Street Address 64 Queach Road		
City Bradford	State CT	Zip 06405	City Bradford	State CT	Zip 06405
Director Name Mary Acquarulo			Director Name		
Street Address 64 Queach Road			Street Address		
City Bradford	State CT	Zip 06405	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/SERIES PAR VALUE			
		100	COMMON	NONE	
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 JOSEPH ACQUARULO, PRESIDENT				Date 1/28/2025	
Signature of Authorized Representative 					