RI SOS Filing Number: 202566022830 Date: 2/13/2025 4:00:00 PM



# State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2025

## Non-Profit Corporation

- → Filing period: February 1 May 1 → Filing Fee: \$20.00

FILED	,
FEB 13 2025	
BY 10%	, !

→ Filing Fee: \$20.00 → Penalty: Additional \$25.00					WE DOWN		
1 Entity ID Number 001702991	2. Exact name RiteFit*	2. Exact name of the Corporation DOS MADE NON-SUBSTANTIVE EDITS					
3 State of Incorporation	5. Bnef descri	Bnet description of the character of business conducted in Rhode Island					
RI	Recruitme	Recruitment, staffing and job placement.					
4 NAICS Code	:						
561311	ř						
6. Principal Office Address	<del>?</del>		City	State	Ζıp		
100 East Avenue	•		Pawtucket	RI	02860		
7. List ALL officers (names an				Check the box to indicate a	n attachment		
President Name Zack Mezera			Vice-President Name Cristina Amedeo				
Street Address 84 Isabella Avenue			Street Address 33 Lane #1				
<sup>Cdy</sup> Providence	State RI	<sup>Zip</sup> 02908	City Warwick	State RI	<sup>Zip</sup> 02888		
Secretary Name Patricia Martinez			Treasurer Name James Burdick				
Street Address 142 Oakland Avenue			Street Address 77 Gray Street				
City Pawtucket	State RI	<sup>Zip</sup> 02861	City Warwick	State RI	70 02889		
8. List ALL directors (names a	and addresses). RI C	orporations MUST	ist at least THREE directors.	Check the box to indicate a	n attachment		
Director Name Zack Mezera			Director Name Cristina Amedeo				
Street Address 84 Isabella Avenue			Street Address 33 Lane #1				
City Providence	State R1	<sup>Zip</sup> 02908	<sup>Crly</sup> Warwick	State RI	Zp 02000		
Director Name Patricia Martinez			Drector Name James Burdick				
Street Address 142 Oakland Avenue			Street Address 77 Gray Street				
Cny Pawtucket	State RI	<sup>2</sup> 02861	City Warwick	State RI	Zip 02889		
9. The Registered Agent infor	mation of record with	the RI Department	of State is accurate. Change	s require filing Form 64	l,		
Under penalty of perjury, I ostatements, and that all sta	declare and affirm ti tements contained i	hat i have examine herein are true an	ed this report, including any discorrect.	accompanying sched	ules and		
This report must be signed by either t	he President, Vice-Preside	nt, Secretary, Assistant S	ecretary, Treasurer, duly Authonzed F	Representative, Receiver or Tru	stee		
Name of Officer/Authorized Representative				Date			
Craig Baker	<i>:</i>			1/17/202	<u> </u>		
Signature of Officer/Authorize	d 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 RiteFit, Inc.

**Board of Directors** as of Jan 1, 2025

#### President

Mr. M. Zachary Mezera 84 Isabella Ave Providence, RI 02908

Vice President Ms. Cristina Amedeo 33 Lane #1 Warwick, RI 02888

### Treasurer

Mr. James Burdick 77 Gray St Warwick, RI 02889

Secretary Ms. Patricia Martinez 142 Oakland Avenue Pawtucket, RI 02861

#### Member/Director

Mr. Craig Baker 44 Hickory Road Attleboro, MA 02703

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