RI SOS Filing Number: 202566287400 Date: 2/24/2025 4:00:00 PM

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State of Rhode Island Department of State - Business Services Divisi				FILED	í. L		
Annual Report for the year: 2025				EED 9 4 2025		<u>ွဲ</u>	
Corporation ————————————————————————————————————				FEB 2 4 2025			
Filing Fee: \$50.00			CBN	BY 40286	á		
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.				DI		5	
1. Entity ID Number	Exact name of the Corporation					_	
150580	G & A Transportation, Inc.						
3. Principal Office Address			City		State	Zip	
67 Ipswich Street			Johnst	on	RI	02919	
4. NAICS Code		Brief description of the character of business conducted in Rhode Island					
485320	Limo Service						
5. State of Incorporation	·						
Rhode Island							
7. List ALL officers (names and addresses)				Check the box to indicate an attachment			
President Name Mark Vittorioso			Vice-President Name SAME				
Street Address 67 Ipswich			Street Address				
Johnston	State RI	^{Zip} 02919	City		State	Zip	
Secretary Name SAME			Treasurer Name SAME				
Street Address			Street Address				
City	State	Zip	City		State	Zrp	
List ALL directors (names and addresses) Director Name			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 This information is currently of recess	d in the	10. Shares Issue		Check the box	to indicate a	n attachment	
This information is currently of record in the Department of State.		2000		Common			
Changes require an additional filing.							
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							
Mark Vittorioso					Date 2-14-25		
Signature of Authorized Representative							
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov