RI SOS Filing Number: 202566613290 Date: 2/28/2025 4:00:00 PM

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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025				FER 2,8 2025						
→ Filing period, February 1 - May				ĐΨ	- } {					
-> Filing Fee \$50 CO				DI.		K				
→ Penalty: Additional \$25 00 fee	ay 31						/			
1 Entity ID Number	2 Exact name of	the	Corporation							
001336251	INC									
3 Principal Office Address		City			State	Z _' p				
114 GRANITE STRE		WESTE	RLY	RI 02891						
4 NAICS Code	6. Brief description	n o	f the character of busine	ess conducte	d in Rhode Island					
42399C										
5 State of Incorporation										
RI	SERVICE		_							
7. List ALL officers (names and a	Check the box to indicate an attachment									
President Name	Vice-President Name									
ROBERT WHITESIDE		<u> </u>		<u> </u>						
Street Address	Street Address									
65 ROSE LANE				T -						
City	State	Zıp		City		State	-	Ζιρ		
CUMBERLAND	RI	(2864							
Secretary Name	Treasurer Name									
Street Address		Street Address								
City	State)	C·ty State			e Zip				
13. T										
8 List ALL directors (names and addresses)					Check the box to indicate an attachment					
Cirector Name					Director Name					
Street Address	Street Address									
City	State Zip)	City	ity			Zip		
Director flame	Director Name									
Street Address				Street Address						
City	State	Zıp)	City		State		Z ₁ p		
9 Shares Authonzed		10. Shares Issued		C	Check the box to indicate an attachment					
This information is currently of record in the NUVBER OF S				MARES CLASSISER ES PAR VALUE						
Department of State. Changes require an additional filing.			1000	STK		1 .	01			
11 This report must be executed o			•			in the hands	of a re-			
Ceiver 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 WWW Twill Date 12/24/2025										
Signature of Authorized Representative										
ROBERT WHITESIDE										

MAIL TO:

· Division of Business Services

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

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