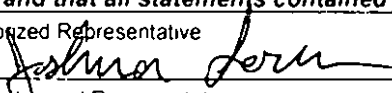
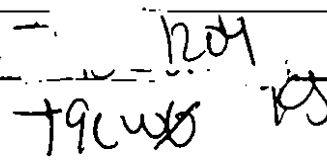


State of Rhode Island
Department of State - Business Services Division

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
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25 MAR 4 PM 1:43:21

1. Entity ID Number 001699807		2. Exact name of the Corporation PAPER STREET MUSIC COMPANY INC			
3. Principal Office Address 12 ARMSTRONG AVENUE, APT. 3 LEFT		City PROVIDENCE		State RI	Zip 02903
4. NAICS Code 711510		6. Brief description of the character of business conducted in Rhode Island MUSIC PRODUCTION & PROMO			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JOSHUA A. SOUSA			Vice-President Name		
Street Address 12 ARMSTRONG AVE, APT 3L			Street Address		
City PROVIDENCE	State RI	Zip 02903	City	State	Zip
Secretary Name JOSHUA A. SOUSA			Treasurer Name JOSHUA A. SOUSA		
Street Address 12 ARMSTRONG AVE, APT 3L			Street Address 12 ARMSTRONG AVE, APT 3L		
City PROVIDENCE	State RI	Zip 02903	City PROVIDENCE	State RI	Zip 02903
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name JOSHUA A. SOUSA			Director Name		
Street Address 12 ARMSTRONG AVE, APT 3L			Street Address		
City PROVIDENCE	State RI	Zip 02903	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 <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
		1000		CNP	0
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 				Date 3/4/25	
Signature of Authorized Representative JOSHUA A. SOUSA				BY  MAR 04 2025	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov