



State of Rhode Island
Department of State - Business Services Division

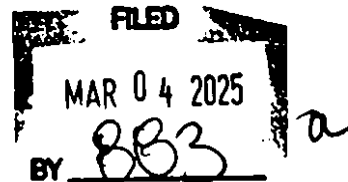
Annual Report for the year: 2025

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



1. Entity ID Number 000538971		2. Exact name of the Corporation 138 Main Street, Inc.			
3. Principal Office Address 84 Oak Street		City Westerly		State RI	Zip 02891
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Purchase Real Estate			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Robert Ritacco			Vice-President Name John Ritacco		
Street Address 84 Oak Street			Street Address 84 Oak Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name John Ritacco			Treasurer Name Robert Ritacco		
Street Address 84 Oak Street			Street Address 84 Oak Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Robert Ritacco			Director Name John Ritacco		
Street Address 84 Oak Street			Street Address 84 Oak Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment ☐					
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment ☐		
			NUMBER OF SHARES 2000	CLASS/SERIES Common	PAR VA. UF No Par
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 Robert Ritacco					Date 2/25/25
Signature of Authorized 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