RI SOS Filing Number: 202566627710 Date: 3/4/2025 4:00:00 PM

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State of Rhode Island and Providence Plantations Department of State - Business Services Division						(1)
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Annual Report for the year: 2025						1 1 1 1 X 1 X 1 X 1 X 1 X 1 X 1 X 1 X 1
→ Filing period: January 1 - March 1						
→ Filing Fee: \$50,00						J
→ Penalty: Additional \$25.00 fe 1. Entity ID Number						
144607	2. Exact name of	the Corporation	nkin	s St.Co	シ レブル	tran
3. Principal Office Address			City		State	Zip
100 Jenkin		·		ridence	RI	0206
				onducted in Rhode Isla		
5. State of Incorporation	TO. OU	201 a	evelc	2p 5, M	unag	Q.
R. <u>T</u>		real	Es.	tate	9	
7. List ALL officers (names and add President Name	esses)			Check th	e box to indic	ate an attachment
Leonard J. Long.			Vice-President Name			
Street Address 100 Jen Kins St -			Street Address			
Providence	State 1	02906	City		State	Zip
Secretary Name		<u> </u>	Treasurer Nam	ne	<u> </u>	<u> </u>
Street Address			Street Address			
City	State	Zip	City		State	Zip
List ALL directors (names and ad	drosess		<u> </u>			
Director Name					ne box to indic	ate an attachment
			Street Address			
100 JOUKIN	JC 21	<u> </u>	-			
city Providence	P	2029a	City		State	Zip
Director Name			Director Name			
Street Address			Street Address			
City	State	Žip	City		State	Zip
9. Shares Authorized		10. Shares Issue	d .	Charlett	no bay to india	ate an attachment
This information is currently of record Department of State.	d in the	NUMBER OF S	HARES_	CLASS/SFRIES	Te box to indic	PAR VALUE
Changes require an additional filing.		1000		commo	5	NO. FAC
 This report must be executed or trustee, this report must be execute 	i behalf of the corp d on behalf of the	poration by an aut	thorized repres	sentative. If the corpor	ation is in the	hands of a receiver or
Under penalty of perjury, I declar statements, and that all statemen	e and affirm that	I have examined	this report, i	ncluding any accom	panying sche	dules and
Name of Authorized Representative	ts contained her	ein are true and	correct.	· · · · · · · · · · · · · · · · · · ·	Date	
Leonard J. Long 1 3.4.25						ZAGED
Signature of Authorized Representative Command Command MAR 0 4 2025						
MAIL TO:		- 100		7/ /07		NAL Y-
Division of Business Services 148 W. River Street, Providence, Rhode	Island 02904-2615				少) by_ <u>L</u>	XVWM
Phone: (401) 222-3040 Website: www.sos.ri.gav					ーノ FOR	