



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
MAR 05 2025
 BY 2781

1. Entity ID Number 000116093		2. Exact name of the Corporation Joe Rossi and Company, Ltd.	
3. Principal Office Address 137 Abbott Run Valley Road		City Cumberland	State RI
		Zip 02864	
4. NAICS Code 512110	6. Brief description of the character of business conducted in Rhode Island Makeup design for film, television and theatre.		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Joseph A. Rossi		Vice-President Name Christina Rossi	
Street Address 137 Abbott Run Valley Road		Street Address 137 Abbott Run Valley Road	
City Cumberland	State RI	City Cumberland	State RI
Zip 02864		Zip 02864	
Secretary Name Christina Rossi		Treasurer Name Joseph A. Rossi	
Street Address 137 Abbott Run Valley Road		Street Address 137 Abbott Run Valley Road	
City Cumberland	State RI	City Cumberland	State RI
Zip 02864		Zip 02864	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Joseph A. Rossi		Director Name	
Street Address 137 Abbott Run Valley Road		Street Address	
City Cumberland	State RI	City	State
Zip 02864		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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	
		None	
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 Joseph A. Rossi			Date March 1, 2025
Signature of Authorized Representative 			