



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:

2025

Corporation

FILED

MAR 07 2025

BY 264

→ 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 001681033		2. Exact name of the Corporation Bryant Plumbing, Inc.			
3. Principal Office Address 35 Leading Street			City Johnston	State RI	Zip 02919
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island PLUMBING			
5. State of Incorporation Rhode Island		TITLE: 7-1.2			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Nicholas C. Bryant			Vice-President Name Nicholas C. Bryant		
Street Address 35 Leading Street			Street Address 35 Leading Street		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name Nicholas C. Bryant			Treasurer Name Nicholas C. Bryant		
Street Address 35 Leading Street			Street Address 35 Leading Street		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name NONE			Director Name		
Street Address			Street Address		
City	State	Zip	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 ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIALS		
			PAR VALUE		
			100		
			Common		
			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 Nicholas C. Bryant					Date 03/04/2025
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
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