RI SOS Filing Number: 202566732090 Date: 3/10/2025 2:21:00 PM

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State of Rhode Island

## **Department of State - Business Services Division**

al Report for the year: 2024

iling period: February 1 - May 1

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→ Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.					:SD 20:00				
1. Entity ID Number 001698679	2. Exact name of the Corporation Road Warriors Transport Inc								
3. Principal Office Address 98 BLOODGOOD ST			PAWT	UCKET	State RI		Z <sub>IP</sub> 02861		
4. NAICS Code 238390 5. State of Incorporation	6. Brief description of the character of business conducted in Rhode Island TRANSPORTATION BUSINESS TITLE: 7-1.2-1701								
7. List ALL officers (names and ac	I) Gan D			Check the box to indicate an attachment					
RAFAEL SALAZAR HERNANDEZ				Vice-President Name					
Street Address 989 BLOODGOOD ST			Street Address						
City PAWTUCKET	State RI	<sup>Zip</sup> 02861	City		State		Zip		
Secretary Name		•	Treasurer Name				•		
Street Address			Street Address						
City	State	Zip	City		State		Zip		
8. List ALL directors (names and a	addresses)		In	Check the b	ox to indic	cate an att	achment 🔲		
Director Name			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 Issu		Check the b		cate an att			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIE:	5	0.00	PAR VALUE		
		1400		<u> </u>		0.00			
11. This report must be executed	on behalf of the co	rporation by an a	uthorized rep	resentative. If the corpo	oration is i	n the hand	ls of a re-		
ceiver or trustee, this report must Under penalty of perjury, I decla					npanying	schedule	s and		
statements, and that all stateme Name of Authorized Representation		rein are true and	d correct.	PILED	IData				
May 1		LNANOEZ		1112	Date /	10/20	25		
Signature of Authorized Represen	tative H		- DV	91EN7					
MAIL TO: Division of Business Services 48 W. River Street, Providence, Rhoo	le Island 02904-2615	5	2	21 1	પ				

Phone: (401) 222-3040 Website: www.sos.ri gov

FORM 630- Revised: 12/2023