



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 12 2025
BY 13762 *a*

1. Entity ID Number 53907		2. Exact name of the Corporation D & D MODEL CLEANING & CASTING INC			
3. Principal Office Address 2 Leah Street			City Johnston	State RI	Zip 02919
4. NAICS Code 339910		6. Brief description of the character of business conducted in Rhode Island The business of jewelry casting, cleaning and mold making			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Steven Dias			Vice-President Name Domenic Dias		
Street Address 26 Elson Drive			Street Address 49 Donnelly Street		
City Riverside	State RI	Zip 02915	City East Providence	State RI	Zip 02914
Secretary Name Carla Dias			Treasurer Name Steven Dias		
Street Address 26 Elson Drive			Street Address 26 Elson Drive		
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 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		
			100	Common	No Par Value
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 Steven Dias				Date 03/09/25	
Signature of Authorized Representative <i>Steven Dias</i>					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov