



**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.

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1. Entry ID Number <b>000094251</b>	2. Exact name of the Corporation <b>COSTA LIQUORS, LTD.</b>
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3. Principal Office Address <b>265 Beverage Hill Avenue</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
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4. NAICS Code <b>445310</b>	6. Brief description of the character of business conducted in Rhode Island <b>TO OWN AND OPERATE A RETAIL LIQUOR STORE</b>
5. State of Incorporation <b>RI</b>	

7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>JOSE M COSTA</b>			Vice-President Name <b>ANTONIO J CARREIRA</b>		
Street Address <b>61 Greenwood Avenue</b>			Street Address <b>36 Reynolds Avenue</b>		
City <b>Seekonk</b>	State <b>MA</b>	Zip <b>01771</b>	City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>
Secretary Name <b>CARMINDA CARREIRA</b>			Treasurer Name <b>ANA P COSTA</b>		
Street Address <b>36 Reynolds Avenue</b>			Street Address <b>61 Greenwood Avenue</b>		
City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>	City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>

8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>JOSE M COSTA</b>			Director Name <b>ANTONIO J CARREIRA</b>		
Street Address <b>61 Greenwood Avenue</b>			Street Address <b>36 Reynolds Avenue</b>		
City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>	City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02768</b>
Director Name <b>CARMINDA CARREIRA</b>			Director Name <b>ANA P COSTA</b>		
Street Address <b>36 Reynolds Avenue</b>			Street Address <b>61 Greenwood Avenue</b>		
City <b>Rehoboth</b>	State <b>MA</b>	Zip <b>02769</b>	City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>

9. Shares Authorized	10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SLRIS
Changes require an additional filing.	<b>200</b>	<b>Common</b>
		<b>No par value</b>

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 <b>JOSE M COSTA</b>	Date <b>2-13-25</b>
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Signature of Authorized Representative <i>Jose Costa</i>	<b>FILED</b>
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