RI SOS Filing Number: 202568398690 Date: 3/26/2025 4:00:00 PM State of Rhode Island Department of State - Business Services Division Annual Report for the year: Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. Entity ID Numbe Exact name of the Corporation 001748931 Vieira Stone, Inc. 3. Principal Office Address Zıp 02769 State 513 Winthop St Rehoboth MA NAICS Code Brief description of the character of business conducted in Rhode Island 238340 Installation of Tile & Counter Tops State of Incorporation RΙ List ALL officers (names and addresses) Check the box to indicate an attachment President Name Vice-President Name Antonio C Vieira Erico Vieira Street Address Street Address 15 South Phillips St 15 South Phillips St State Ζıρ Zip City State East Providence RI 02914 East Providence RI 02914 Secretary Name Treasurer Name Antonio C Vieira Erico Vieira Street Address Street Address 15 South Phillips St 15 South Phillips St City State Zıp City State 02914 East Providence RI East Providence 02914 RI 8. List ALL directors (names and addresses) Check the box to indicate an attachment Director Name Director Name Street Address Street Address City State Zφ City State Zıp Director Name **Director Name** Street Address Street Address City State Zip City State Zip Shares Authorized 10. Shares Issued Check the box to indicate an attachment This information is currently of record in the Department of State. 100 Common Changes require an additional filing. 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 Date Antonio C Vieira gnature of Authorized Representative

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

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