



State of Rhode Island

Department of State - Business Services Division

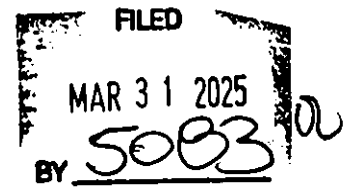
Annual Report for the year: 2025

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



1. Entity ID Number 001668857		2. Exact name of the Corporation Kirshenbaum Law Associates, Inc.			
3. Principal Office Address 2000 Chapel View Blvd., Suite 380			City Cranston	State RI	Zip 02920
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island Practice of Law			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Evan M. Kirshenbaum, Esq.			Vice-President Name Evan M. Kirshenbaum, Esq.		
Street Address 2000 Chapel View Blvd., Suite 380			Street Address 2000 Chapel View Blvd., Suite 380		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Evan M. Kirshenbaum, Esq.			Treasurer Name Evan M. Kirshenbaum, Esq.		
Street Address 2000 Chapel View Blvd., Suite 380			Street Address 2000 Chapel View Blvd., Suite 380		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Evan M. Kirshenbaum, Esq.			Director Name		
Street Address 2000 Chapel View Blvd., Suite 380			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES 1000	CLASS/SERIES CNP	PAR VALUE 0.00
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. <i>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.</i>					
Name of Authorized Representative Evan M. Kirshenbaum, Esq.					Date 3/27/2025
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov