



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

APR 07 2025

BY

2840 R

1. Entity ID Number 000795450		2. Exact name of the Corporation Burbank's Plumbing and Heating INC.			
3. Principal Office Address 606 Stony Lane			City North Kingstown	State RI	Zip 02852
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island Plumbing and Heating installation and service			
5. State of Incorporation R.I.					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jared Burbank			Vice-President Name NONE		
Street Address 606 Stony Lane			Street Address		
City North Kingstown	State RI	Zip 02852	City	State	Zip
Secretary Name NONE			Treasurer Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
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	PAR VALUE
		100		0	
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 JARED BURBANK					Date 4/3/2025
Signature of Authorized Representative <i>Jared Burbank Pres.</i>					

MAIL TO:

Division of Business Services
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Website: www.sos.ri.gov