RI SOS Filing Number: 202571703920 Date: 4/24/2025 4:00:00 PM

State of Rhode Island						- MLED		
Department of St Annual Report for the ye	ivision			APR 2.4.2023				
Annual Report for the year: 2025 Corporation			BY					
 → Filing period: February 1 - → Filing Fee: \$50.00 → Penalty: Additional \$25.00 								
1. Entity ID Number								
000112409	THE FISH	THE FISH BOWL AQUARIUM AND PETS MART, CO.						
3. Principal Office Address	•		City		State	Zip		
725 Providence Street			West Wa	rwick	RI	02893		
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island							
311119	To operate and conduct an aquarium and pet store							
5 State of Incorporation	7							
Rhode Island	1							
7. List ALL officers (names and ac	dresses)				he box to i	ndicate an attachment 🗆		
President Name Michael A. Marabello, Jr.			Vice-President Name Michael A. Marabello, Jr.					
Street Address 159 Lakeside A	Street Address 159 Lakeside Avenue							
^{City} Cranston	State RI	^{Zip} 02910	^{City} Cranston		State RI	^{Z_{ip}} 02910		
Secretary Name Michael A. Ma	arabello, Jr.	St	Treasurer Nan	- Lynn Marabell	0			
159 Lakeside Avenue			159 Lakeside Avenue					
^{City} Cranston	State RI	^{Z_{ip}} 02910	^{City} Crans	ton	State RI	^{Zip} 02910		
8. List ALL directors (names and a Director Name	addresses)		Disastes Name		he box to	ndicate an attachment 🗀		
Michael A. Ma	Director Name							
Street Address 159 Lakeside /	Street Address							
City Cranston	State RI	^{Z_{IP}} 02910	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City		State	Zip		
9. Shares Authorized	<u> </u>	10. Shares Issue			he box to II	ndicate an attachment		
This Information is currently of record in the Department of State.		NUMBER OF SHARES		<u> </u>		PAR VALUE		
Changes require an additional filing.		3,000		STK		\$0.0000		
11. This report must be executed trustee, this report must be execu					ation is in t	the hands of a receiver or		
Under penalty of perjury, I declar	ere and affirm tha	t i have examined	d this report, i		panying s	chedules and		
statements, and that all statements and that all statements with the statements and that all statements are statements.		rein are true and	correct.		Date			
Michael A. Marabello, J.			4	1/18/25				
Signature of Authorized Represen	Ative				•	• •		

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov