



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 25 2025 STAMP

BY 153166

1. Entity ID Number 000294620		2. Exact name of the Corporation A. Fire & Safety Company, Inc.			
3. Principal Office Address 101 Mount Hope Avenue			City Bristol	State RI	Zip 02809
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Fire and safety contracting.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Doreen A. DaSilva			Vice-President Name Francisco S. DaSilva		
Street Address 101 Mount Hope Ave.			Street Address 101 Mount Hope Ave.		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Doreen A. DaSilva			Treasurer Name Francisco S. DaSilva		
Street Address 101 Mount Hope Ave.			Street Address 101 Mount Hope Ave.		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Francisco S. DaSilva			Director Name		
Street Address 101 Mount Hope Ave.			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			1000	Stock	\$0.01
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. <b>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.</b>					
Name of Authorized Representative Francisco S. DaSilva					Date 4-8-25
Signature of Authorized Representative 					