RI SOS Filing Number: 202572410430 Date: 4/28/2025 3:59:00 PM

State of Rhode Island Department of St		ss Services D	ivision		S <sup>-</sup>	TAMP
Annual Report for the year:	2025			RECEIV	ED	500
Corporation ————————————————————————————————————						
→ Filing Fee: \$50.00	May I			500 3103	, .,	
→ Penalty: Additional \$25.00 t				2025 APR 28	P <u>3:57</u>	
1. Entity ID Number		f the Corporation				
001720758	Cloud Do	nuts inc	In:		To: ·	I so
Principal Office Address 6689 Post Road			North	Kingstown	State	2ip O2852
4. NAICS Code	6. Brief descripti	on of the characte	r of busines:	s conducted in Rhode Isl	land .	1
722513	6. Brief description of the character of business conducted in Rhode Island Sells Coffee, Donuts and Breakfast Sandwicher					
5. State of Incorporation RI		,				
7. List ALL officers (names and addresses) President Name			Check the box to indicate an attachment  Vice-President Name			
Monyta Dung			Figure resident radine			
Street Address 1987 Elmwood Ave			Street Address			
city Warvick	State 77	<sup>Z19</sup> 02888	City		State	Zip
Secretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City		State	Zip
8. List ALL directors (names and a	ddresses)		IDirector No		x to indicate a	n attachment 🔲
Director Name			Director Name			
Street Address			Street Address			
City	State	Zıp	City		State	Zip
Director Name			Director Name		1	
Street Address			Street Address			
City	State	Zip	City		State	Zip
	1	<u> </u>				
9. Shares Authorized This information is currently of reco	rd in the	10. Shares Issue		Check the bo	x to indicate a	n attachment 🔲
Department of State. Changes require an additional filing.		0			0.00	
11. This report must be executed of	on hebalf of the co	rooration by an aut	thorized ren	recentative. If the corner	ation is in the	hands of a re-
ceiver or trustee, this report must be	e executed on be	half of the corpora	tion by the r	eceiver or trustee.		
Under penalty of perjury, I decla statements, and that all stateme				t, including any accomp	panying sche	dules and
Name of Authorized Representativ			COTTACE.		Date	[
Monyta Cling					4/18	12025
Signature of Authorized Represent	anomatic	Auns		FIL	ピリ	
MAIL TO:	WINDLYNV.	I MANY		8 DO 8	9 7075	<u> </u>
Division of Business Services	//	//		APR Z	0 (0()	2^Z/A
	a laland 00004 0015			APR 2	0 2023	3,59
148 W. River Street, Providence, Rhode Phone: (401) 222-3040	e Island 02904-2615			BY KY	324	3,59 0- Revised: 12/2023