



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

REC'D RIDOS BSD
25 MAY 8 AM 10:32:49

1. Entity ID Number <u>000104483</u>		2. Exact name of the Corporation <u>VERONICA'S DREAM INC</u>	
3. Principal Office Address <u>1775 Baldwells Rd</u>		City <u>Warrick</u>	State <u>RI</u>
4. NAICS Code <u>448120</u>		6. Brief description of the character of business conducted in Rhode Island <u>WOMEN'S CLOTHING STORE</u>	
5. State of Incorporation <u>RI</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>RONNIE GOLDEN ENGLE</u>		Vice-President Name	
Street Address <u>1775 Baldwells Rd</u>		Street Address	
City <u>Warrick</u>	State <u>RI</u>	City <u>02886</u>	State <u>RI</u>
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
Zip		City	State
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
Zip		City	State
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
Zip		City	State
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐	
This information is currently of record in the Department of State.		NUMBER OF SHARES <u>3000</u>	CLASS/SERIES <u>STN</u>
Changes require an additional filing.			PAR VALUE <u>0</u>
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 <u>[Signature]</u>		FILED	Date <u>5/8/2025</u>
Signature of Authorized Representative <u>[Signature]</u>		MAY 08 2025 <u>5N2T7</u>	

MAIL TO:
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