State of Rhode Island
Department of State - Business Services Division

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25 MAY 16 PM 0:15:11

STAMP

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.

1. Entity ID Number	2. Exact name of the Corporation			
000082949	WEST SHORE ENTERPRISES, INC.			
3. Principal Office Address		City	State	Zip
2134 WEST SHORE ROAD		WARWICK	RI	02886
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
811121	TO OWN AND OPERATE A BUSINESS TO PERFORM AUTO BODY REPAIRS ON MOTOR VEHICLES.			
5. State of Incorporation				
RHODE ISLAND				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name STEVEN P. KAZANJIAN, JR.			Vice-President Name JILL KAZANJIAN		
Street Address 2134 WEST SHORE ROAD			Street Address 2134 WEST SHORE ROAD		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886
Secretary Name STEVEN P. KAZANJIAN, JR.			Treasurer Name STEVEN P. KAZANJIAN, JR.		
Street Address 2134 WEST SHORE ROAD			Street Address 2134 WEST SHORE ROAD		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	COMMON	NO PAR VALUE

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	Date
STEVEN P. KAZANJIAN, JR., PRESIDENT	3/13/25

Signature of Authorized Representative

Steven Kazanjian Jr.

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website:www.sos.ri.gov

FILED
MAY 16 2025
BY 3685

FORM 630 - Revised: 2/2023