RI SOS Filing Number: 202573395510 Date: 5/19/2025 4:00:00 PM 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. 2. Exact name of the Corporation 1. Entity ID Number BATISTA & GUTIERREZ, INC 001692838 3. Principal Office Address City 02907 RI PROVIDENCE 895 ELMWOOD AVENUE 6. Brief description of the character of business conducted in Rhode Island 4. NAICS Code SUPERMARKET WITH LARGE MEAT DEPT AND DELI 445110 5. State of Incorporation RHODE ISLAND Check the box to indicate an attachment 7. List ALL officers (names and addresses) Vice-President Name ARLENY GUTIERREZ President Name ARLENNY Y. GUTIERREZ Street Address Street Address 2 PINETREE DR 2 PINETREE DR ^{Žip} 01844 State MA MA **METHUEN** 01844 **METHUEN** Treasurer Name JOSE M. BATISTA Secretary Name ARLENY Y. GUTIERREZ Street Address 2 PINETREE DR 2 PINETREE DR State Zip 01844 State **METHUEN** MA 01844 MA **METHUEN** Check the box to indicate an attachment 8. List ALL directors (names and addresses) Director Name Director Name Street Address Street Address Zip State Zip City State City Director Name Director Name Street Address Street Address Zip State City State Zip City Check the box to indicate an attachment 9. Shares Authorized 10. Shares Issued PAR VALUE NUMBER OF SHARES CLASS/SERIES This information is currently of record in the Department of State. \$0.0000 10.000.00 CNP Changes require an additional filing. 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 12/26/2024 ARLENY Y. GUTIERREZ Signature of Authorized Representative

MAIL TO:

Division of Business Services

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

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