



State of Rhode Island

## Department of State - Business Services Division

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25 MAY 21 PM 12:51:00  
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STATE

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 1707258		2. Exact name of the Corporation Ourania Voulgari Inc.			
3. Principal Office Address 20 NEWMAN AVENUE UNIT 1313			City Rumford	State RI	Zip 02916
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island Domestic Profit Corporation			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Ourania Voulgari			Vice-President Name		
Street Address 20 NEWMAN AVENUE UNIT 1313			Street Address		
City Rumford	State RI	Zip 02916	City	State	Zip
Secretary Name Ourania Voulgari			Treasurer Name Ourania Voulgari		
Street Address 20 NEWMAN AVENUE UNIT 1313			Street Address 20 NEWMAN AVENUE UNIT 1313		
City Rumford	State RI	Zip 02916	City Rumford	State RI	Zip 02916
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
		NUMBER OF SHARES 1000	CLASS/SFR FS CNP	PAR VALUE NO PAR	
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 Ourania Voulgari, President				Date 04/09/2025	
Signature of Authorized Representative 				FILED MAY 21 2025 BY E9	