RI SOS Filing Number: 202574278830 Date: 6/2/2025 4:00:00 PM

FILED

State of Rhode Island								
Department of St		s Services D	Division	JUN n 2	2025	\sim	:	
Annual Report for the year:	2025			JUN 11 2 BY (05)	, ,	(-	·	
Corporation -				BY 105	<u>コル</u>	_ ;		
7 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								
000083322 URSO & COMPANY, INC								
Principal Office Address GRANITE STREET			City Weste	rly	State RI			
NAICS Code				s conducted in Rhode Isla	and	<u>i</u>		
541330	ACCOUNTING AND BUSINESS CONSULTING SERVICES							
5. State of Incorporation Rhode Island	1							
7. List ALL officers (names and addresses)				Check the box to indicate an attachment				
President Name DANIEL J URSO			Vice-President Name					
reet Address 75 GRANITE STREET			Street Address					
City WESTERLY	State RI	^{Zip} 02891	City		State	Citis	₹P 70	
Secretary Name			Treasurer Name					
Street Address			Street Address					
City	State	Zip	City		State	U	Zip CS TO K	
8. List ALL directors (names and addresses) Check the box to indicate an attachment								
Director Name DANIEL J URSO			Director Na	ame		,	1 ()	
Street Address 75 GRANITE STREET			Street Address					
City WESTERLY	State RI	^{Zip} 02891	City	у		State Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zíp	City		State		Zıp	
9. Shares Authorized		10. Shares Issue		Check the box	k to indic			
This information is currently of record in the Department of State. Changes require an additional filing.		1000		CNP 0.00		AR 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								
DANIEL J URSO, CPA			5/28/25					
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.n.gov