RI SOS Filing Number: 202574342360 Date: 6/9/2025 4:00:00 PM

State of Rhode Island  Department of State - Business Services Division					FILED			
Annual Report for the year: 2025 Corporation				,	JUN 0 9 2025 0			
Filing period: February 1 - May 1  Filing Fee: \$50.00  Penalty: Additional \$25.00 fee if form is not filed by May 31.								
Entity ID Number	2. Exact name of the Corporation							
000061660	Clean Environment, Inc.							
3. Principal Office Address 705 Hatchery Road			City North	State Kingstown RI			Zip 02852	
4. NAICS Code 541620	6. Brief description of the character of business conducted in Rhode Island							
5. State of Incorporation Rhode Island	Environmental site assessment and engineering services							
7. List ALL officers (names and addresses)  Check the box to indicate an attachme							chment 🗆	
President Name John E. Lavoie				Vice-President Name None				
Street Address 705 Hatchery Road			Street Address					
City North Kingstown	State RI	<sup>Zip</sup> 0 <b>2</b> 852	City	<u> </u>	State		Zip	
Secretary Name John E. Lavoie			Treasurer Name John E. Lavoie					
Street Address 705 Hatchery Road				Street Address 705 Hatchery Road				
North Kingstown	State RI	<sup>Zip</sup> 02852	City Norti	h Kingstown	State RI		<sup>Zip</sup> 02852	
B. List ALL directors (names and addresses)  Director Name  None				Check the box to indicate an attachment  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	
3. Onales Additionages			10. Shares Issued Check th NUMBER OF SHARES CLASS/SE		box to indicate an attachment  PAR VALUE			
This information is currently of record in the Department of State.  Changes require an additional filing.		500		Common			r 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  John E. Lavoie  Date  05/3/						امرام	٠ - ١	
Signature of Authorized Representative								
Holm & Land								

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