



**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.

**RECEIVED
25 JUN 27 PM 2:04:29
RIDOS BSD
STAMP**

1. Entity ID Number 000504939		2. Exact name of the Corporation MOO Inc.							
3. Principal Office Address 25 Fairmount Ave				City East Providence		State RI		Zip 02914	
4. NAICS Code 323111		6. Brief description of the character of business conducted in Rhode Island FULFILLMENT AND DISPATCH OF PERSONALIZED PRINTED PRODUCTS							
5. State of Incorporation DE									
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐									
President Name Richard Moross (CEO)					Vice-President Name				
Street Address 25 Fairmount Ave					Street Address				
City East Providence		State RI		Zip 02914		City		State Zip	
Secretary Name					Treasurer Name				
Street Address					Street Address				
City		State		Zip		City		State Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐									
Director Name None					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				10. Shares Issued Check the box to indicate an attachment ☐					
This information is currently of record in the Department of State. Changes require an additional filing.				NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
				5000		CWP		0.0100	
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. FILED									
Name of Authorized Representative Patrick Stirling-Howe							Date 6/2/2025		
Signature of Authorized Representative Patrick Stirling-Howe							BY JUN 27 2025 2025		