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State of Rhode Island
Department of State - Business Services Division

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STAMP

Annual Report for the year: 2023
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	2. Exact name of the Corporation			
789873	NoNa's Smoke Shop II INC			
3. Principal Office Address		City	State	Zip
3030 East Main St		Portsmouth	R.I	02871
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
453991	Tobacco, Glass, Cigarettes, Cigars Smoking Accessies, CBd,			
5. State of Incorporation				
R.I				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
Ali IMRAN					
Street Address			Street Address		
58 Bagzett AVE					
City	State	Zip	City	State	Zip
N. Providence	R.I	02904			
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			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 — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
0		0

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 JUL 22 2025

Name of Authorized Representative	Date
Ali IMRAN	7/22/25
Signature of Authorized Representative	BY Idm4C

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

FORM 630 Revised. 12/2023