RI SOS Filir	ng Number: 202	2577690710	Date: 8/1	8/2025 4:00:00 I	PM		
State of Rhode Is  Department of		ess Services I	Division				
Annual Report for the year Corporation  → Filing period: February	RECEIVED  R.I. DEPT. OF STATE  BUS SYCS DIV						
→ Filing Fee: \$50.00 → Penalty: Additional \$25.	00 fee if form is no	t filed by May 31.		2025 . 2440	10	1 <del>-55</del>	
1. Entity ID Number 001666397	2. Exact name	2025 AUG 18 A II 38  2 Exact name of the Corporation  Bates Finishing Supply Inc					
3. Principal Office Address 26 Clinton Drive			City Hollis	•	State NH	Zip 03049	
4. NAICS Code 423990  5. State of Incorporation MASS		6 Brief description of the character of business conducted in Rhode Island Distributor of industrial supplies					
7. List ALL officers (names and	d addresses)			Check the	box to indic	ate an attachment 🗆	
President Name Paul J Van	Vice-President Name none						
Street Address 110 Russell Road			Street Address				
<sup>City</sup> Fanwood	State NJ	<sup>Zip</sup> 07023	City		State	Zıp	
Secretary Name MaryJo Va	nBuskirk		Treasurer I	Name none		•	
Street Address 110 Russell			Street Add	ress	<u> </u>		
<sup>City</sup> Fanwood	State NJ	<sup>Zip</sup> 07023	City		State	Zip	
8. List ALL directors (names a	nd addresses)		Director No		box to indi	cate an attachment	
Director Name none			Director Name none				
Street Address			Street Address				
City	State	Zıp	City	City		Zıp	
Director Name none			Director Name none				
Street Address		· .	Street Add	ress	<del></del>		
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Iss				icate an attachment PAR VALUE	
This information is currently of record in the Department of State.		8000	FSHARES	Common stock		No par value	
Changes require an additional	filing.						
11. This report must be execu ceiver or trustee, this report m Under penalty of perjury, I of statements, and that all state	nust be executed on leclare and affirm t	behalf of the corpo hat I have examin	ration by the ed this repo	receiver or trustee.			
Name of Authorized Represent Paul J VanBuskirk			Date 08/0	Date 08/06/25			
Signature of Authorized Repro	esentative		F	TLED			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

