

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025
Corporation

Filing period: February 1 - May 1

RID 9.9	FOR STATE USE ONLY
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→ Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.					3SD 12:1			
Entity ID Number		me of the Corpora						
001778023	PG &'	PG &' RD PAINTING INC						
3. Principal Office Address	•		City	()	State	Zip		
193 Clarance	51	F21	Pro	lidence	R:I	02909		
4. ÑAICS Codé		cription of the cha	racter of busin	ness conducted in R	hode Island			
238320		05				·.		
5. State of Incorporation		Paintin	5			•		
RI	ŀ	. ()					
7. List ALL officers (names and	addresses)			Check	k the box to indicate	e an attachment		
President Name		1 -		esident Name	4- 0-1			
Pedro Gutierres Hernandez Street Address			Street A	Rony E Duante Ochoa				
4 Cales S	4 Calef St			193 Clarence st npt 1 Cry State Zip				
City ,	State	Zip	Crty	-1	State	Zip		
Johnston	RI	02919		-ovidence	RI	02909		
Secretary Name			reasur	er Name				
Street Address			Street A	Street Address				
City	State	Zip	City	City		Zip		
		,			State			
8. List ALL directors (names ar	nd addresses)		In.		k the box to indicate	e an attachment 🔲		
Director Name			Director	Name				
Street Address			Street A	Street Address				
City	State	Zip	City		State	Zip		
City	State	Zip	City		State	المالية المالية		
Director Name			Director	Director Name				
Street Address			Street A	Street Address				
					<u></u>			
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			NUMBER OF SHARES		CLASSISERIES PAR VALUE			
Department of State.		100		PNP	0			
Changes require an additional fi	anges require an additional filing.		•		İ			
11. This report must be execute	ed on behalf of th	ne corporation by a	an authorized i	representative. If the	e corporation is in the	ne hands of a re-		
ceiver or trustee, this report mu						ic hands of a re-		
Under penalty of perjury, I de					accompanying so	hedules and		
statements, and that all state Name of Authorized Represent		a nerein are true	ana correct.	. <u> </u>	Date	,		
· · · · · · · · · · · · · · · · · · ·								
Padro Gutler Signature of Authorized Repres	reで <u>Her</u> sentative	-nander			09/04	114047		
				FILED				
PedroGutiOne THE sna	nach			SEP U 9 2025				
MAIL TO:				22. UJ E0EJ				

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

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

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