



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division

**FILED**

MAR 09 2020

BY 1014

Annual Report for the year: **2020**  
 Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <b>70844</b>		2. Exact name of the Corporation <b>Rustic Warehouse, Inc.</b> <i>Clapachet</i>			
3. Principal Office Address <i>96 FARNUM RD</i>		City <i>East Providence</i>		State <b>RI</b>	Zip <i>02814</i>
4. NAICS Code <b>493110</b>		6. Brief description of the character of business conducted in Rhode Island <b>Distribution of furniture, accessories and paraphernalia.</b> <i>02814</i>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Jeffrey Meek</b>			Vice-President Name <b>None</b>		
Street Address <i>101 Dexter Road 96 FARNUM</i>			Street Address		
City <i>East Providence</i>		State <b>RI</b>	Zip <i>02814</i>	City State Zip	
Secretary Name <b>Jeffrey Meek</b>			Treasurer Name <b>None</b>		
Street Address <i>101 Dexter Road 96 FARNUM</i>			Street Address		
City <i>East Providence</i>		State <b>RI</b>	Zip <i>02814</i>	City State Zip	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			2,000		Common
					PAR VALUE
					.00
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 <b>Jeffrey Meek</b>					Date <i>3/3/2020</i>
Signature of Authorized Representative 					

MAIL TO:  
 Division of Business Services  
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