State of Rhode IslandFee: \$50.00Office of the Secretary of State
Division Of Business Services
148 W. River Street Providence RI 02904-2615
(401) 222-3040
Business Corporation Annual Report Filing Period: February 1 - May 1
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.
ANNUAL REPORT YEAR: 2022
1. Corporate ID No. 001678853
2. Name of Corporation <u>Bad-Adz, Inc.</u>
3. Street Address Principal Business Office:
No. and Street:38 CHURCH STCity or Town:PAWTUCKETState:RIZip:02860Country:USA
4. Business Phone No.
<u>4017234782</u>
5. State of Incorporation
State: <u>RI</u>
ARTICLE III
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>541810</u>
6. Brief Description of the Character of Business Conducted in Rhode Island
<u>THE CORPORATION HAS THE PURPOSE OF ENGAGING IN ANY LAWFUL BUSINESS,</u> <u>AND</u> <u>SHALL</u> <u>HAVE</u>
PERPETUAL EXISTENCE UNTIL DISSOLVED OR TERMINATED IN CCORDANCE WITH CHAPTER 7-1.2.
7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title

Incorporator is no longer applicable; please delete.

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	JOEL M ALBRIZIO	431 PINE TREE CT ATLANTIS, FL 33462 USA	
TREASURER	JOEL M ALBRIZIO	431 PINE TREE CT ATLANTIS, FL 33462 USA	
SECRETARY	JOEL M ALBRIZIO	431 PINE TREE CT ATLANTIS, FL 33462 USA	
CFO	DOUGLAS J FLEURANT	73 OLD NASONVILLE ROAD HARRISVILLE, RI 02860 USA	
ASSISTANT SECRETARY	JENNIFER ALBRIZIO	431 PINE TREE CT ATLANTIS, FL 33462 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	75,000.00	1000

9. 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.

Signed this 11 Day of February, 2022 at 10:55:57 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DOUGLAS FLEURANT

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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