	State of Rhode Office of the Secreta Division Of Busines 148 W. River S	ary of State s Services	e: \$50.00				
HOPE	Providence RI 029 (401) 222-30	04-2615					
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: 202	<u>23</u>						
1. Corporate ID No. 001701476							
2. Name of Corporation MDB-T Management, Inc.							
3. Street Address Principal E	Business Office:						
No. and Street: <u>550 GEORG</u> City or Town: <u>SMITHFIEL</u>		AY State: <u>RI</u> Zip: <u>02917</u> Country:	: <u>USA</u>				
4. Business Phone No.							
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>541611</u>							
6. Brief Description of the Character of Business Conducted in Rhode Island							
<u>MANAGEMENT</u>							
7. Names and Addresses of	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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.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	ALEXANDRA MCEWEN	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 USA
TREASURER	ALEXANDRA MCEWEN	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 USA
SECRETARY	ALEXANDRA MCEWEN	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 USA
VICE PRESIDENT	JAMES BOTVIN	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 USA
DIRECTOR	ALEXANDRA MCEWEN	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 USA
DIRECTOR	TIMOTHY INGERSON	122 DOTY CIRCLE WEST SPRINGFIELD, MA 01089 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	10,000.00	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 19 Day of December, 2022 at 4:55:38 PM. 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 ALEXANDRA MCEWEN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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