



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

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 R.I. DEPT. OF STATE
 BUS SVCS DIV.

2023 MAR 30 A 10:10

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <u>00 0009 016</u>		2. Exact name of the Corporation <u>TASTEX CORPORATION</u>			
3. Principal Office Address <u>123 Arden Drive</u>		City <u>EAST GREENWICH</u>	State <u>RI</u>	Zip <u>02818</u>	
4. NAICS Code <u>3131103</u>		6. Brief description of the character of business conducted in Rhode Island <u>Buyer + Seller OF Yarn</u>			
5. State of Incorporation <u>RI</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>DAVID V. GOLASTEIN</u>			Vice-President Name		
Street Address <u>123 Arden Drive</u>			Street Address		
City <u>EAST GREENWICH</u>	State <u>RI</u>	Zip <u>02818</u>	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <u>DAVID V. GOLASTEIN</u>			Director Name		
Street Address <u>123 Arden Drive</u>			Street Address		
City <u>EAST GREENWICH</u>	State <u>RI</u>	Zip <u>02818</u>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9 Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES <u>3075</u>		CLASS/SERIES
					PAR VALUE <u>1.00</u>
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 				Date <u>3/30/23</u>	
Signature of Authorized Representative					

FILED
 MAR 30 2023
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