



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

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

RECEIVED STAMP
 R.I. DEPT. OF STATE
 BUS SVCS
 2023 MAY 31
 A 10:47

1. Entity ID Number 000522576		2. Exact name of the Corporation V & S FARM, INC.	
3. Principal Office Address 696 BROADWAY		City PAWTUCKET	State RI
		Zip 02860	
4. NAICS Code 447110	6. Brief description of the character of business conducted in Rhode Island GAS STATION/CONVENIENCE STORE		
5. State of Incorporation RHODE ISLAND			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name HARSHINDER PATHANIA		Vice-President Name HARSHINDER PATHANIA	
Street Address 4 COHASSET LANE		Street Address 4 COHASSET LANE	
City CRANSTON	State RI	Zip 02921	City CRANSTON
			State RI
			Zip 02921
Secretary Name HARSHINDER PATHANIA		Treasurer Name HARSHINDER PATHANIA	
Street Address 4 COHASSET LANE		Street Address 4 COHASSET LANE	
City CRANSTON	State RI	Zip 02921	City CRANSTON
			State RI
			Zip 02921
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
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 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	CLASS/SERIES
		600	COMMON
			PAR VALUE
			NO PAR VALUE
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 HARSHINDER PATHANIA, PRESIDENT		Date 5/23/23	
Signature of Authorized Representative <i>Harshinder Pathania</i>			

FILED

MAY 31 2023
 BY ML 3717