



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

2023 AUG 17 P 4 26

1. Entity ID Number <b>000568104</b>		2. Exact name of the Corporation <b>Ricci Furniture, Inc</b>			
3. Principal Office Address <b>770 Main Street</b>		City <b>West Warwick</b>		State <b>RI</b>	Zip <b>02893</b>
4. NAICS Code <b>238390</b>		6. Brief description of the character of business conducted in Rhode Island <b>Retail furniture sales</b>			
5. State of Incorporation <b>RI</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>Liberato Ricci</b>			Vice-President Name <b>Liberato Ricci</b>		
Street Address <b>770 Main Street</b>			Street Address <b>770 Main Street</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02891</b>
Secretary Name <b>Liberato Ricci</b>			Treasurer Name <b>Liberato Ricci</b>		
Street Address <b>770 Main Street</b>			Street Address <b>770 Main Street</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02891</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Liberato Ricci</b>			Director Name		
Street Address <b>770 Main Street</b>			Street Address		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02891</b>	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	PAR VALUE
		<b>2000</b>		<b>Common</b>	<b>No Par</b>
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.					
<i>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.</i>					
Name of Authorized Representative <b>Liberato Ricci</b>					Date
Signature of Authorized Representative 					

**FILED 426**  
**AUG 17 2023**  
**BY 44344**