



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

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

FILED:
MAR 12 2024
BY: 16878 DS

1. Entity ID Number 000112867		2. Exact name of the Corporation PRINCESS & SONS PIZZA, INC.			
3. Principal Office Address 105 PLEASANT VIEW AVENUE			City SMITHFIELD	State RI	Zip 02917
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island PIZZA AND BAKERY			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JOSHUA SMITH			Vice-President Name SAME		
Street Address 105 PLEASANT VIEW AVENUE			Street Address		
City SMITHFIELD	State RI	Zip 02917	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
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			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	
		400		CNP	
				0.00	
				PAR VAL JF	
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 JOSHUA SMITH				Date 3/4/2024	
Signature of Authorized Representative <i>Joshua Smith</i>					

MAIL TO:
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