



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.

REC'D RIDCS BSD
24:16:22 PM 1:22:13

1. Entity ID Number 001691282		2. Exact name of the Corporation SNEAKERSHOUTS LTD			3	
3. Principal Office Address 340 Wilbert Way			City North Kingstown	State RI	Zip 02852	
4. NAICS Code 458210		6. Brief description of the character of business conducted in Rhode Island Online sneaker sales				
5. State of Incorporation RI						
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
President Name Ivan Antunes			Vice-President Name None			
Street Address 340 Wilbert Way			Street Address			
City North Kingstown	State RI	Zip 02852	City	State	Zip	
Secretary Name Ivan Antunes			Treasurer Name Ivan Antunes			
Street Address 340 Wilbert Way			Street Address 340 Wilbert Way			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
Director Name Ivan Antunes			Director Name None			
Street Address 340 Wilbert Way			Street Address			
City North Kingstown	State RI	Zip 02852	City	State	Zip	
Director Name None			Director Name None			
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/ST. RILS	
			100		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 Ivan Antunes					Date 3-1-2024	
Signature of Authorized Representative <i>Ivan Antunes</i>					FILED	

MAR 22 2024
BY ML 206