



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

FILED
 MAR 27 2024
 BY 6014
 DS

- 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 43330		2. Exact name of the Corporation AIR METALWORKS, LTD.			
3. Principal Office Address 180 Shannock Village Road			City Shannock	State RI	Zip 02875
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Sheet metal contractors			
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 Frank S. Angell			Vice-President Name Donna Marie Angell		
Street Address 180 Shannock Village Road			Street Address 180 Shannock Village Road		
City Shannock	State RI	Zip 02875	City Shannock	State RI	Zip 02875
Secretary Name Donna Marie Angell			Treasurer Name Frank S. Angell		
Street Address 180 Shannock Village Road			Street Address 180 Shannock Village Road		
City Shannock	State RI	Zip 02875	City Shannock	State RI	Zip 02875
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	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/SERIES	
		1000		Common	
				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 Frank S. Angell					Date 3/25, 2024
Signature of Authorized Representative 					