



**State of Rhode Island
Department of State - Business Services Division**

FILED

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.

MAR 28 2024
BY 1221
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1. Entity ID Number 000288586		2. Exact name of the Corporation SRI Cleaning, Inc.			
3. Principal Office Address 5 Beech Hill Road			City Wakefield	State RI	Zip 02879
4. NAICS Code 561720		6. Brief description of the character of business conducted in Rhode Island Own, operate, and manage a residential and commercial cleaning service.			
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 Stephanie D. Sevey			Vice-President Name Erica L. Turner		
Street Address 5 Beech Hill Road			Street Address 275 Usquepaugh Road		
City Wakefield	State RI	Zip 02879	City West Kingston	State RI	Zip 02892
Secretary Name Stephanie D. Sevey			Treasurer Name Stephanie D. Sevey		
Street Address 5 Beech Hill Road			Street Address 5 Beech Hill Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Stephanie D. Sevey			Director Name		
Street Address 5 Beech Hill Road			Street Address		
City Wakefield	State RI	Zip 02879	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	PAR VALUE
		100,000	STK	\$0.0100	
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 Stephanie D. Sevey, President					Date March 25, 2024
Signature of Authorized Representative <i>Stephanie D Sevey</i>					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov