



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2024

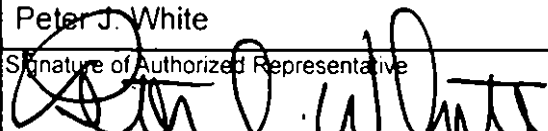
Corporation

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

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24 APR 10 4:11:38

**STAMP**

FOR SECRETARY OF STATE  
USE ONLY

1. Entity ID Number <b>19447</b>		2. Exact name of the Corporation <b>INDUSTRIAL BURNER SERVICE, INC.</b>			
3. Principal Office Address <b>723 Harris Avenue</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
4. NAICS Code <b>811219</b>		6. Brief description of the character of business conducted in Rhode Island <b>Service and install commercial and industrial boiler room equipment.</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 checked="" type="checkbox"/></span>					
President Name <b>Peter J. White</b>			Vice-President Name <b>Nancy J. White</b>		
Street Address <b>38 Fairview Avenue</b>			Street Address <b>38 Fairview Avenue</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
Secretary Name <b>Megan Labrecque</b>			Treasurer Name <b>Peter J. White</b>		
Street Address <b>17 Rosedale Street</b>			Street Address <b>38 Fairview Avenue</b>		
City <b>North Providence</b>	State <b>RI</b>	Zip <b>02911</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</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>Peter J. White</b>			Director Name <b>Nancy J. White</b>		
Street Address <b>38 Fairview Avenue</b>			Street Address <b>38 Fairview Avenue</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.		10 Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		1000		common	
				PAR VALUE	
				no par	
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.					
<b>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.</b>					
Name of Authorized Representative <b>Peter J. White</b>					Date <b>3/6/24</b>
Signature of Authorized Representative 					<b>FILED</b>

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

APR 10 2024  
BY ML 33264