



State of Rhode Island
Department of State - Business Services Division

MAY 01 2024

24263702

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.

1. Entity ID Number 20888		2. Exact name of the Corporation QUALITY BEEF CO. INC.			
3. Principal Office Address 931 Jefferson Blvd., Suite 204			City Warwick	State RI	Zip 02886
4. NAICS Code 424470		6. Brief description of the character of business conducted in Rhode Island Wholesale Food Distribution			
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 William P. Catauro, Jr.			Vice-President Name		
Street Address 25 Bath Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name			Treasurer Name William P. Catauro, Jr.		
Street Address			Street Address 25 Bath Street		
City	State	Zip	City Providence	State RI	Zip 02908
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.		<small>NUMBER OF SHARES</small>		<small>C. ASS/S-RIFS</small>	
		200	Common	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					
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 William P. Catauro, Jr.					Date 4-25-24
Signature of Authorized Representative 					

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