RI SOS Filing Number: 200939911150 Date: 01/05/2009 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: $50.00* **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK**

**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation			
95369	CATANZARO & Son's PAINTING Inc.			
3. Street Address Principal Business Office		City	State	Zip
145 Royal Avenue		Cranston	RI	02920
4. Business Phone No.	5. State of Incorporation			
401-245-0707				

6. Brief Description of the Character of Business Conducted in Rhode Island
painting & wallpaper

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Henry Catanzaro	Kellee Catanzaro
Street Address	Street Address
145 Royal Ave	145 Royal Avenue
City / State / Zip	City / State / Zip
Cranston / RI / 02920	Cranston / RI / 02920
Secretary Name	**Treasurer Name**
Kellee Catanzaro	Henry Catanzaro
Street Address	Street Address
145 Royal Ave.	145 Royal Ave.
City / State / Zip	City / State / Zip
Cranston / RI / 02920	Cranston / RI / 02920

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

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

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9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1000	0	0

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
0	0	0

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.

[redacted] [redacted]

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.

Kellee Catanzaro 12/29/08
Signature *Date*

Kellee Catanzaro
Print or Type Name

Vice President
Title

[redacted]

File Date FILED
Check No. JAN 05 2009 10:47
By: By 077262
FOR SECRETARY OF STATE USE ONLY KMC

Form 630 Rev. 12/06

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