



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 2011

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. 34155		2. Name of Corporation SILVA PAINTING, INC.			
3. Street Address Principal Business Office PO BOX 153			City CUMBERLAND	State RI	
			Zip 02864		
4. Business Phone No. 4017257775		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island home improvements, general painting, and general construction					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name AMERICO M. DASILVA			Vice President Name AMERICO M. DASILVA		
Street Address 48 AMHURST ST.			Street Address 48 AMHURST ST.		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	
Secretary Name MARIA DASILVA			Treasurer Name MARIA DASILVA		
Street Address 48 AMHURST ST.			Street Address 48 AMHURST ST.		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name AMERICO M. DASILVA			Director Name MARIA DASILVA		
Street Address 48 AMHURST ST.			Street Address 48 AMHURST ST.		
City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES -- THIS SECTION MUST BE COMPLETED		
			Number of Shares 200	Class/Series COMMON	Par Value NO PAR VALUE

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.

FILED

File Date MAR 24 2011

Check No. 1871

By: BY

FOR SECRETARY OF STATE USE ONLY

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.

Americo M. Silva
Signature Date
AMERICO M. DASILVA 1-29-2011
Print or Type Name
PRESIDENT
Title