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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 2012

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		
66395	M. Valelli Mulchworks Landscape Construction, Inc.		
3. Street Address Principal Business Office: 350 Pippin Orchard Rd.	City: Cranston	State: RI	Zip: 02921
4. Business Phone No.: 401-467-6881	5. State of Incorporation: Rhode Island		

6. Brief Description of the Character of Business Conducted in Rhode Island: To engage in the business of landscape engineering and construction.

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

President Name: Michael J. Valelli	Vice President Name: none
Street Address: 350 Pippin Orchard Rd.	Street Address:
City: Cranston State: RI Zip: 02921	City: State: Zip:
Secretary Name: none	Treasurer Name: none
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

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

Director Name: none	Director Name: none
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:
Director Name: none	Director Name: none
Street Address:	Street Address:
City: State: Zip:	City: State: Zip:

9. SHARES AUTHORIZED

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.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
none		

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]

FILED

File Date: JAN 30 2012

Check No.: [redacted]

By: 4097

FOR SECRETARY OF STATE USE ONLY

72589-8-720916

[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.

Signature: Michael Valelli Date: 1/27/12

Michael J. Valelli
Print or Type Name

president / owner / operator
Title

[redacted]

Form 630 Rev. 08/08