



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. 74912		2. Name of Corporation Capriati Construction Corp, Inc.			
3. Street Address Principal Business Office 1020 Wigwam Parkway			City Henderson	State NV	Zip 89074
4. Business Phone No. (702) 547-1182		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island General Construction and Remodeling					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David M. Rocchio			Vice President Name David M. Rocchio		
Street Address 1020 Wigwam Parkway			Street Address 1020 Wigwam Parkway		
City Henderson	State NV	Zip 89074	City Henderson	State NV	Zip 89074
Secretary Name David M. Rocchio			Treasurer Name David M. Rocchio		
Street Address 1020 Wigwam Parkway			Street Address 1020 Wigwam Parkway		
City Henderson	State NV	Zip 89074	City Henderson	State NV	Zip 89074
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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
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 100	Class/Series COMMON	Par Value NONE
			THIS SECTION MUST BE COMPLETED		

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: FEB 06 2012
 Check No. _____
 By: 6065
 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.

David M. Rocchio
 Signature _____ Date _____
 David M. Rocchio
 Print or Type Name
 President
 Title