



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 11557		2. Exact name of the Corporation Park Ave Cement Block Co., Inc.			
3. Principal office address 30 Budlong Road		City Cranston		State RI	Zip 02920
4. Business Phone No. 401-942-4800		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Manufacturer of Concrete Block					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Antonio D. Pezza			Vice-President Name Anthony H. Pezza		
Street Address 246 Glen Hills Drive			Street Address 5 Old Mill Road		
City Cranston	State RI	Zip 02920	City Norfolk	State Ma	Zip 02056
Secretary Name Antonio D. Pezza			Treasurer Name Antonio D. Pezza		
Street Address 246 Glen Hills Drive			Street Address 246 Glen Hills Drive		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Antonio D. Pezza			Director Name Linda Pezza Andrews		
Street Address 246 Glen Hills Drive			Street Address 5 Old Mill Road		
City Cranston	State RI	Zip 02920	City Norfolk	State Ma	Zip 02056
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. 500 NO PAR VALUE			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			280	Common	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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

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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 of Authorized Representative

Antonio D. Pezza

Printer Type Name of Authorized Representative

Date

12/19/12