

## 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

1. Entity ID No.	2. Exact nam	2. Exact name of the Corporation					
94828	A. GAZ	A. GAZERRO & ASSOCIATES, INC.					
3. Principal office address			City		State	Zip	
1343 Hartford Avenue			Johnston		RI	02919-0000	
4. Business Phone No. (401) 751-8850			5. State of Incorporation RI				
6. Brief description of the manufacturers' re		conducted in Rhode Island	1				
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President Name			Vice-President Name				
Andrew Gazerro, Jr.			Andrew Gazerro, Jr.				
Street Address			Street Address				
25 Thomas Lane			25 Thomas Lane				
City	State	Zip	City		State	Zip	
Cranston	RI	02921-	Cranston		RI	02921-	
Secretary Name Dolores A. Gazerro			Treasurer Name Dolores A. Gazerro				
Street Address 25 Thomas Lane			Street Address 25 Thomas Lane				
City Cranston	State RI	Zip 02921-	City Cranston		State RI	Zip 02921-	
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Director Name			Director Name				
Andrew Gazerro, Jr.			Dolores A. Gazerro				
Street Address			Street Address				
25 Thomas Lane			25 Thomas Lane				
City Cranston	State	Zip	City		State	Zip	
	RI	02921-	Cranston		RI	02921-	
Director Name			Director Name				
none			none				
Street Address none			Street Address none				
City	State	Zip	City		State	Zip	
none	none	none	none		none	none	
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This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SE	CLASS/SERIES PAR V		
			200	Co	mmon	No Par	
See Section 9 of instruc	tion sheet.	FILED					
			1			<u> </u>	

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.

JAN 0.2 2013 Under penalty of perfury, I declare and affirm that I have examined.

MMC)

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

1/07/2013 Date

Andrew Gazerro, Jr.

Print or Type Name of Authorized Representative

President

Form No. 630 Revised: 01/2012