

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 2014

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.	2. Exact na	me of the Corporation				
791098	Nunes	Nunes Excavation, Inc.				
3. Principal office address 1 Nunes Lane			Gity West Warwick	State RI	Zip 02893	
4. Business Phone No. 401-821-8697			5. State of Incorporation			
6. Brief description of the cha Commercial excavati			1			
7. LIST ALL OFFICERS (NA	MES AND ADD	RESSES) ("X" BOX FOR A	TTACHMENT)			
President Name Joshua Nunes			Vice-President Name Lori Nunes			
Street Address 1 Nunes Lane			Street Address 42 Bailey Drive			
City West Warwick	State RI	Zip 02893	City West Greenwick	h State	Zip 02817	
Secretary Name Kristen Nunes			Treasurer Name Joshua Nunes			
Street Address 1 Nunes Lane			Street Address 1 Nunes Lane			
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893	
8. LIST <u>ALL</u> DIRECTORS (N	AMES AND AD	DRESSES) ("X" BOX FOR	ATTACHMENT)			
Director Name Joshua Nunes			Director Name			
Street Address 1 Nunes Lane			Street Address			
City West Warwick	State RI	Zip 02893	City	State	Zip 4 4 33 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip S	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
			150	Common	No Par Value	
This report must be executed	d on behalf of the this report mi	e corporation by an authorize ust be executed on behalf of	the corporation by the re	egejver or trustee.	'	
File Date			this report, including and that all states	eriury, I deplare and affir ig any accompanying so ents contained herein ar	there is nave examined there is and statements frue and correct.	
Check No		FILED	A tto		Blitte 1	
Ву:		MAR 1 4 2014	<i></i>	ized Representative		
FOR SECRETARY OF STA	TE USE ONLY	10 210000	Joshua Nunes	of Authorized Representa	tiva	
orm No. 630 levised: 01/2012	By	mianipu	Print of Type Name	or Authorized Representa	uv⊆	

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