State of Rhode Island
and Providence Plantations
Office of the Secretary of State

Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

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			
101601	A-1 Builders General Contractor, Ltd.			
3. Street Address Principal Business Office		City	State	Zip
685 Warren Avenue		East Providence	RI	02914
4. Business Phone No.	5. State of Incorporation			
401-431-1426	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
to act as general contractor for the construction, repairing and remodeling of buildings and public works of all kinds

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

President Name			Vice President Name		
Ricardo Amaral			Francine Amaral		
Street Address			Street Address		
321 County Street			321 County Street		
City	State	Zip	City	State	Zip
Seekonk	MA	02771	Seekonk	MA	02771
Secretary Name			Treasurer Name		
Frederic A. Marzilli			Ricardo Amaral		
Street Address			Street Address		
685 Warren Avenue			321 County Street		
City	State	Zip	City	State	Zip
East Providence	RI	02914	Seekonk	MA	02771

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

Director Name			Director Name		
None					
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

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
100	common	no par
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.

[redacted]

FILED
FEB 05 2015

File Date _____ BY _____
Check No. 4241
By: _____
FOR SECRETARY OF STATE USE ONLY

[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.

Ricardo Amaral 1/23/15
Signature *Date*

Ricardo Amaral
Print or Type Name

President
Title

[redacted]

Form 630 Rev. 08/08