



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 2015

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. 791299		2. Exact name of the Corporation GIO CORP.			
3. Principal office address 50 RANDALL STREET			City CRANSTON	State RI	Zip 02920
4. Business Phone No.			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island CONSTRUCTIONS					
President Name JAMES GIOVAGNIOLLI			Vice-President Name SAME		
Street Address 50 RANDALL STREET			Street Address		
City CRANSTON	State RI	Zip 02920	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name JAMES GIOVAGNIOLLI			Director Name		
Street Address 50 RANDALL STREET			Street Address		
City CRANSTON	State RI	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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
			500.00	CWP	\$0.0100

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

FEB 25 2015

BY

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.

James Giovagniolli 02/10/2015
Signature of Authorized Representative Date

JAMES GIOVAGNIOLLI

Print or Type Name of Authorized Representative