



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

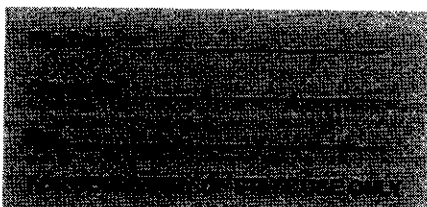
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

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. 64110		2. Exact name of the Corporation BRANCA BROTHERS, INC.			
3. Principal office address 65 STARR STREET		City JOHNSTON	State RI	Zip 02919	
4. Business Phone No. (401) 944-5927		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island BUSINESS OF WASTE DISPOSAL REMOVAL FOR PROFIT					
PRESIDENT NAME AND ADDRESS (SEE BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name JOSEPH P. BRANCA			Vice-President Name DANIEL S. BRANCA		
Street Address 65 STARR STREET			Street Address SAME		
City JOHNSTON	State RI	Zip 02919	City	State	Zip
Secretary Name DANIEL S. BRANCA			Treasurer Name JOSEPH P. BRANCA		
Street Address SAME			Street Address SAME		
City	State	Zip	City	State	Zip
DIRECTORS NAME AND ADDRESSES (SEE BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES ISSUED (SEE 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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			200	COMMON	NO PAR

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

MAR 18 2015

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.

Daniel S. Branca
Signature of Authorized Representative

3/14/15
Date

DANIEL S. BRANCA, VICE - PRESIDENT

Print or Type Name of Authorized Representative

BY 6160