



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 2016

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. 148917		2. Exact name of the Corporation R.A. Giovanetti & Assoc. Consulting Engineers, Inc.			
3. Principal office address 100 Saint Johns Lane			City Mullica Hill	State NJ	Zip 08062
4. Business Phone No.			5. State of Incorporation New Jersey		
6. Brief description of the character of business conducted in Rhode Island Perform consulting engineering.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Richard A. Giovanetti			Vice-President Name Mark S. Shulman		
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201		
City Broomall	State PA	Zip 19008	City Broomall	State PA	Zip 19008
Secretary Name Mark S. Shulman			Treasurer Name Connie M. Giovanetti		
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201		
City Broomall	State PA	Zip 19008	City Broomall	State PA	Zip 19008
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Mark S. Shulman			Director Name Richard A. Giovanetti		
Street Address 370 Reed Road, Suite 201			Street Address 370 Reed Road, Suite 201		
City Broomall	State PA	Zip 19008	City Broomall	State PA	Zip 19008
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" 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
			612	Common	\$1.00

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.

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

FILED

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.

Richard A. Giovanetti 1/11/16
 Signature of Authorized Representative Date
Richard A. Giovanetti, President
 Print or Type Name of Authorized Representative

RV JAN 15 2016
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