



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

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Business Corporation
Annual Report

Filing Period January 1 - March 1



Need more help?

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.

ANNUAL REPORT YEAR: ~~2015~~ 2016

1. Corporate ID No. 000062851

2. Name of Corporation Morra Electric Inc.

3. Street Address Principal Business Office:

No. and Street: 95 RAILROAD AVENUE

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

4. Business Phone No.

401-232-3585

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

ELECTRICAL CONTRACTING

FILED

JAN 19 2016

BY 5519

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title
PRESIDENT

Individual Name
DAVID MORRA

Address
95 RAILROAD AVE JOHNSTON
R.I. 02919

Delete

PRESIDENT

First, Middle, Last, Suffix

DAVID P MORRA

Address, City or Town, State, Zip Code, Country

95 RAILROAD AVENUE
JOHNSTON, RI 02919 USA

Select From Below ↕ Title:

First Name:

Middle Name:

Last Name:

Suffix:

Address:

City:

State:

Zip:

Country:

Clear

Add

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
STK		\$0.0000	1,000.00	1,000.00

9. 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.

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: David Morra

Business Name:

No. and Street: 95 RAILROAD AVENUE

Principal Office ↕

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: US

Contact Phone: ext:

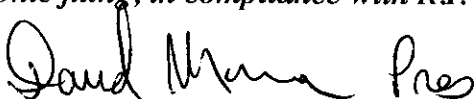
Contact Email:

Clear

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 11 Day of December, 2015 at 4:16:16 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By



Signature of Authorized Representative of the Corporation

FILED

JAN 19 2016

BY 62851

This report cannot be accepted for filing if an officer has executed the form and he/she is not