



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

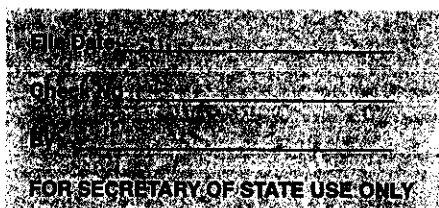
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

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. 98390		2. Exact name of the Corporation VIEIRA & DIGANFILIPPO LTD.			
3. Principal office address 50 Park Row West, Suite 111		City Providence	State RI	Zip 02903	
4. Business Phone No. 401 453 2950		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Professional service corporation pursuant to Title 7-5-1 of the RI General Laws. Conducting the practice of law only through persons qualified to practice law in the State of Rhode Island.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Daniel J. Vieira		Vice-President Name Stephen J. DiGianfilippo			
Street Address 35 Luke Street		Street Address 1305 Frenchtown Road			
City Wrentham	State MA	Zip 02093	City East Greenwich	State RI	Zip 02818
Secretary Name Stephen J. DiGianfilippo		Treasurer Name Daniel J. Vieira			
Street Address 1305 Frenchtown Road		Street Address 35 Luke Street			
City East Greenwich	State RI	Zip 02818	City Wrentham	State MA	Zip 02093
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Daniel J. Vieira		Director Name Stephen J. DiGianfilippo			
Street Address 35 Luke Street		Street Address 1305 Frenchtown Road			
City Wrentham	State MA	Zip 02093	City East Greenwich	State RI	Zip 02818
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: <input type="checkbox"/>					
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	
		300	Common	No Par Value	

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.



Form No. 630
Revised: 01/2012

FILED

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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.

Signature of Authorized Representative

Date

Daniel J. Vieira, President

Print or Type Name of Authorized Representative