



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. 94204		2. Exact name of the Corporation A.P. LEITAO & SONS LANDSCAPING, INC.			
3. Principal office address 68 Hollister Road		City Seekonk	State MA	Zip 02771	
4. Business Phone No. 508-336-0110		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island to conduct the business of landscaping and snow plowing					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Maurino Leitao		Vice-President Name Antonio P. Leitao, Jr.			
Street Address 3 Cardosi Court		Street Address 3 Cardosi Court			
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
Secretary Name Maurino Leitao		Treasurer Name Antonio P. Leitao, Jr.			
Street Address 3 Cardosi Court		Street Address 3 Cardosi Court			
City Pawtucket,	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Antonio P. Leitao, Jr.		Director Name Maurino Leitao			
Street Address 3 Cardosi Court		Street Address 3 Cardosi Court			
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
Director Name None		Director Name None			
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.					

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

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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

Maurino Leitao, President

Print or Type Name of Authorized Representative