



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 000667909		2. Name of Corporation RI Design Build, Inc.			
3. Street Address Principal Business Office 5 Apple tree Lane			City Warwick	State RI	Zip 02888
4. Business Phone No. 401-864-1196		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Construction & Remodeling Services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert L Pearson			Vice President Name Robert L Pearson		
Street Address 5 Apple tree Lane			Street Address 5 Apple tree Lane		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Secretary Name Robert L Pearson			Treasurer Name Robert L Pearson		
Street Address 5 Apple tree Lane			Street Address 5 Apple tree Lane		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 002888
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert L Pearson			Director Name		
Street Address 5 Apple tree Lane			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED					
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 100		Class/Series Common	Par Value .01

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

SEP 01 2016

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.

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

Signature

Robert L Pearson

Print or Type Name

President

Title

Date