



State of Rhode Island and Providence Plantations
 Department of State – Business Services Division

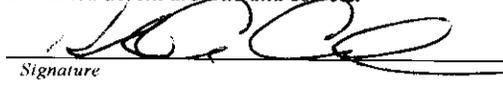
ANNUAL REPORT FOR THE YEAR 2017
Corporation

- **Filing Period:** January 1 - March 1
- **Filing Fee:** \$50.00
- **Penalty:** Additional \$25.00 fee if form is not filed by April 1

1. Corporate ID No. 000105817		2. Name of Corporation A & L Plumbing, Inc.			
3. Street Address Principal Business Office 1 Watercress Court			City Coventry	State RI	Zip 02816
4. NAICS Code 23		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Business of providing plumbing and heating services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Stephen A. Antoch			Vice President Name Louis F. Mathews		
Street Address 1 Watercress Court			Street Address 1 Watercress Court		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Secretary Name Stephen A. Antoch			Treasurer Name Louis F. Mathews		
Street Address 1 Watercress Court			Street Address 1 Watercress Court		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <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.					
			ISSUED SHARES – THIS SECTION MUST BE COMPLETED		
		Number of Shares	Class/Series	Par Value	
		1,000 shares common stock \$.01 per share			

11. 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.

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

1/9/17
 Date

Stephen A. Antoch

Print or Type Name

President

Title

FILED *ov*

JAN 17 2017

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MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov