



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. Entity ID Number 68537		2. Exact name of the Corporation Marcello Lawn & Landscapes Inc.			
3. Principal Office Address 65 Misty Oak Dr		City East Greenwich	State R.I	Zip 02818	
4. NAICS Code 81	6. Brief description of the character of business conducted in Rhode Island Landscape services & lawn cutting				
5. State of Incorporation R.I					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Meghan J Marcello			Vice-President Name NA		
Street Address 65 Misty Oak Dr			Street Address		
City East Greenwich	State R.I	Zip 02818	City	State	Zip
Secretary Name NA			Treasurer Name NA		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Meghan J Marcello			Director Name NA		
Street Address 65 Misty Oak Dr			Street Address		
City East Greenwich	State R.I	Zip 02818	City	State	Zip
Director Name NA			Director Name NA		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing. NO change			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
		NUMBER OF SHARES 200	CLASS/SERIES	PAR VALUE 200	
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.					
Name of Authorized Representative Meghan J Marcello				Date 1/16/17	
Signature of Authorized Representative Meghan J Marcello				FILED	
				SIGN DOCUMENT HERE	

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

JAN 19 2017

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