



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 2017**

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.<br><b>31885</b>  |                    | 2. Exact name of the Corporation<br><b>Providence Casting, Inc.</b>        |                         |                     |                     |
| 3. Principal office address<br><b>3 Warren Avenue</b>   |                    | City<br><b>North Providence</b>  | State<br><b>RI</b>      | Zip<br><b>02911</b> |                     |
| 4. Business Phone No.<br><b>401-231-5344</b>  |                    | 5. State of Incorporation<br><b>Rhode Island</b>                           |                         |                     |                     |
| 6. Brief description of the character of business conducted in Rhode Island<br><b>Jewelry</b>   |                    |  |                         |                     |                     |
| <b>LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)</b> <input type="checkbox"/>  |                    |  |                         |                     |                     |
| President Name<br><b>Anthony Bizzacco</b>   |                    | Vice-President Name<br><b>Robert Bizzacco</b>                              |                         |                     |                     |
| Street Address<br><b>22 Lafazia Drive</b>   |                    | Street Address<br><b>222 Simmonsville Avenue</b>                           |                         |                     |                     |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | Zip<br><b>02919</b>  | City<br><b>Johnston</b> | State<br><b>RI</b>  | Zip<br><b>02919</b> |
| Secretary Name<br><b>David Bizzacco</b>   |                    | Treasurer Name<br><b>David Bizzacco</b>                                    |                         |                     |                     |
| Street Address<br><b>17 Summerfield Drive</b>   |                    | Street Address<br><b>17 Summerfield Drive</b>                              |                         |                     |                     |
| City<br><b>Uxbridge</b>   | State<br><b>MA</b> | Zip<br><b>01569</b>  | City<br><b>Uxbridge</b> | State<br><b>MA</b>  | Zip<br><b>01569</b> |
| <b>LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)</b> <input type="checkbox"/>   |                    |  |                         |                     |                     |
| Director Name<br><b>Anthony Bizzacco</b>  |                    | Director Name<br><b>Robert Bizzacco</b>                                    |                         |                     |                     |
| Street Address<br><b>22 Lafazia Drive</b>   |                    | Street Address<br><b>222 Simmonsville Avenue</b>                           |                         |                     |                     |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | Zip<br><b>02919</b>  | City<br><b>Johnston</b> | State<br><b>RI</b>  | Zip<br><b>02919</b> |
| Director Name<br><b>David Bizzacco</b>  |                    | Director Name  |                         |                     |                     |
| Street Address<br><b>17 Summerfield Drive</b>   |                    | Street Address   |                         |                     |                     |
| City<br><b>Uxbridge</b>   | State<br><b>MA</b> | Zip<br><b>01569</b>  | City                    | State               | Zip                 |
| <b>9. SHARES AUTHORIZED</b>   |                    | <b>10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)</b> <input type="checkbox"/> |                         |                     |                     |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.<br>See Section 9 of Instruction sheet. |                    | NUMBER OF SHARES   | CLASS/SERIES            | PAR VALUE           |                     |
|   |                    | 60   | COMMON                  | NONE                |                     |
|   |                    |  |                         |                     |                     |

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: \_\_\_\_\_  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY

**FILED**

**JAN 25 2017**

BY 23831  
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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.

Anthony Bizzacco 1/14/2017  
Signature of Authorized Representative Date

**Anthony Bizzacco, President**

Print or Type Name of Authorized Representative