



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 759117		2. Exact name of the Corporation KWIK PLUMBING & HEATING, INC.			
3. Principal Office Address 1149 Hartford Avenue		City Johnston		State RI	Zip 02919
4. NAICS Code 81 - Other Services (except Pul	6. Brief description of the character of business conducted in Rhode Island Plumbing and Heating				
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name James A. Fusco			Vice-President Name James A. Fusco		
Street Address 1149 Hartford Avenue			Street Address 1149 Hartford Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name James A. Fusco			Treasurer Name James A. Fusco		
Street Address 1149 Hartford Avenue			Street Address 1149 Hartford Avenue		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name None			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			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			100 Shares		
			Common		
			No Par Value		
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 James A. Fusco					Date 2/6/17
Signature of Authorized Representative <i>James A. Fusco</i>					SIGN DOCUMENT HERE

FILED

FEB 10 2017

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