



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<br><b>1664643</b>                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                 | 2. Exact name of the Corporation<br><b>CARDENTE CONSTRUCTION, INC.</b>                                                                                                                                                                     |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------|------------------------------------|------------------|--------------|-----------|------------|---------------|------------|--|--|--|
| 3. Principal Office Address<br><b>11 FREDERICK DRIVE</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                 | City<br><b>BARRINGTON</b>                                                                                                                                                                                                                  |                                 | State<br><b>RI</b> | Zip<br><b>02806</b>                |                  |              |           |            |               |            |  |  |  |
| 4. NAICS Code<br><b>23 - Construction</b>                                                                                                                                                                                                                                                                                                                                                                                                                        | 6. Brief description of the character of business conducted in Rhode Island<br><b>GENERAL CONSTRUCTION WORK</b> |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| 5. State of Incorporation<br><b>RHODE ISLAND</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                   |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| President Name <b>RALPH CARDENTE</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                                                                                                                                                                                                                                            | Vice-President Name <b>SAME</b> |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Street Address <b>11 FREDERICK DRIVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                 |                                                                                                                                                                                                                                            | Street Address                  |                    |                                    |                  |              |           |            |               |            |  |  |  |
| City <b>BARRINGTON</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           | State <b>RI</b>                                                                                                 | Zip <b>02806</b>                                                                                                                                                                                                                           | City                            | State              | Zip                                |                  |              |           |            |               |            |  |  |  |
| Secretary Name <b>SAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                 |                                                                                                                                                                                                                                            | Treasurer Name <b>SAME</b>      |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Street Address                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                 |                                                                                                                                                                                                                                            | Street Address                  |                    |                                    |                  |              |           |            |               |            |  |  |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                             | State                                                                                                           | Zip                                                                                                                                                                                                                                        | City                            | State              | Zip                                |                  |              |           |            |               |            |  |  |  |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                  |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Director Name <b>RALPH CARDENTE</b>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                 |                                                                                                                                                                                                                                            | Director Name                   |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Street Address <b>11 FREDERICK DRIVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                 |                                                                                                                                                                                                                                            | Street Address                  |                    |                                    |                  |              |           |            |               |            |  |  |  |
| City <b>BARRINGTON</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           | State <b>RI</b>                                                                                                 | Zip <b>02806</b>                                                                                                                                                                                                                           | City                            | State              | Zip                                |                  |              |           |            |               |            |  |  |  |
| Director Name                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                 |                                                                                                                                                                                                                                            | Director Name                   |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Street Address                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                 |                                                                                                                                                                                                                                            | Street Address                  |                    |                                    |                  |              |           |            |               |            |  |  |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                             | State                                                                                                           | Zip                                                                                                                                                                                                                                        | City                            | State              | Zip                                |                  |              |           |            |               |            |  |  |  |
| 9. Shares Authorized<br>This information is currently of record in the Department of State.<br><br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                         |                                                                                                                 | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                      |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                 | <table border="1"><thead><tr><th>NUMBER OF SHARES</th><th>CLASS/SERIES</th><th>PAR VALUE</th></tr></thead><tbody><tr><td><b>100</b></td><td><b>COMMON</b></td><td><b>NPV</b></td></tr><tr><td></td><td></td><td></td></tr></tbody></table> |                                 |                    |                                    | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | <b>100</b> | <b>COMMON</b> | <b>NPV</b> |  |  |  |
| NUMBER OF SHARES                                                                                                                                                                                                                                                                                                                                                                                                                                                 | CLASS/SERIES                                                                                                    | PAR VALUE                                                                                                                                                                                                                                  |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| <b>100</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>COMMON</b>                                                                                                   | <b>NPV</b>                                                                                                                                                                                                                                 |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| 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.<br><b>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.</b> |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    |                                    |                  |              |           |            |               |            |  |  |  |
| Name of Authorized Representative<br><b>RALPH CARDENTE</b>                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    | Date                               |                  |              |           |            |               |            |  |  |  |
| Signature of Authorized Representative<br><i>Ralph Cardente</i>                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                 |                                                                                                                                                                                                                                            |                                 |                    | <b>FILED</b><br><b>MAR 02 2017</b> |                  |              |           |            |               |            |  |  |  |

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