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	2. Exact name of the Corporation		
37708	R & M BUILDERS, INC.		
3. Principal Office Address	City	State	Zip
13 Penny Lane	Cranston	RI	02921
4. NAICS Code: 23 - Construction	6. Brief description of the character of business conducted in Rhode Island: general contractor home building		
5. State of Incorporation: Rhode Island			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: Robert E. Moll			Vice-President Name:		
Street Address: 13 Penny Lane			Street Address:		
City: Cranston	State: RI	Zip: 02921	City:	State:	Zip:
Secretary Name: Robert E. Moll			Treasurer Name: Robert E. Moll		
Street Address: 13 Penny Lane			Street Address: 13 Penny Lane		
City: Cranston	State: RI	Zip: 02921	City: Cranston	State: RI	Zip: 02921

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

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

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
600	common	no par

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: **Robert E. Moll , President**

Date: February 24, 2017

Signature of Authorized Representative: Robert E Moll pres.

FILED
MAR 02 2017
BY 800 DS

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

FORM 630 - Revised: 02/2017