



State of Rhode Island 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 <b>58699</b>		2. Exact name of the Corporation <b>C. Imondi &amp; Son Florists, Inc.</b>			
3. Principal Office Address <b>182 Smithfield Avenue</b>		City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>
4. NAICS Code <b>44-45</b>		6. Brief description of the character of business conducted in Rhode Island  <b>Florist</b>			
5. State of Incorporation <b>RI</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>Pasquale Imondi</b>			Vice-President Name <b>Patricia D. Pascale</b>		
Street Address <b>182 Smithfield Avenue</b>			Street Address <b>182 Smithfield Avenue</b>		
City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	
State <b>RI</b>		Zip <b>02860</b>		State <b>RI</b>	
Secretary Name <b>Pasquale Imondi</b>		Treasurer Name <b>Kathleen V. Imondi</b>			
Street Address <b>182 Smithfield Avenue</b>			Street Address <b>182 Smithfield Avenue</b>		
City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	
State <b>RI</b>		Zip <b>02860</b>		State <b>RI</b>	
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>Pasquale Imondi</b>			Director Name <b>Kathleen V. Imondi</b>		
Street Address <b>182 Smithfield Avenue</b>			Street Address <b>182 Smithfield Avenue</b>		
City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	
State <b>RI</b>		Zip <b>02860</b>		State <b>RI</b>	
Director Name <b>Patricia D. Pascale</b>			Director Name <b>Ernest Pascale</b>		
Street Address <b>182 Smithfield Avenue</b>			Street Address <b>182 Smithfield Avenue</b>		
City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	
State <b>RI</b>		Zip <b>02860</b>		State <b>RI</b>	
9. Shares Authorized					
This information is currently of record in the Department of State.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
Changes require an additional filing.			NUMBER OF SHARES <b>2000</b>	CLASS/SERIES <b>Common</b>	PAR VALUE <b>No Par Value</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. <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 <b>Pasquale Imondi President</b>				Date <b>1/10/17</b>	
Signature of Authorized Representative <i>Pasquale Imondi, President</i>				<b>FILED</b> <b>MAR 29 2017</b> <i>DR</i>	

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

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