RI SOS Filing Number: 201740554910 Date: 4/10/2017 4:00:00 PM



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

1. Entity ID Number		2. Exact name of the Corporation					
73684	P. & G. Engineering Company, Inc.						
3. Principal Office Address			City		State	Zip	
7 Arborwood Drive			Burlingto	on	MA	01803	
4. NAICS Code			cter of business	conducted in Rhod	le Island		
23 - Construction	Engineering Services						
5. State of Incorporation							
MASSACHUSETTS							
7. List ALL officers (names an	d addresses)			Che	eck the box to indic	cate an attachment	
President Name Myles P. Flaherty			Vice-President Name Gregory Flaherty				
Street Address			Street Address				
7 Arborwood			J. J	7 Arborwood I	Drive		
City Burlington	State MA	^{Zip} 01803	City Burlington		State MA	^{Zip} 01803	
Secretary Name Peter Flaherty			Treasurer Name Myles P. Flaherty				
Street Address 7 Arborwood Drive			Street Address 7 Arborwood Drive				
City Burlington	State MA	^{Zip} 01803	City Burlin	ngton	State MA	^{Zip} 01803	
8. List ALL directors (names a	nd addresses)			Che		cate an attachment	
Director Name Peter Flaherty			Director Name None				
Street Address 7 Arborwood Drive			Street Address		70 70	· 英思道	
City Burlington	State MA	^{Zip} 01803	City		State C		
Director Name Gregory Flaherty			Director Name None		ר	? ₹ ₹	
Street Address 7 Arborwood Drive			Street Address			0t E	
City Burlington	State MA	^{Zip} 01803	City		State	Zip	
9. Shares Authorized		10. Shares Is				ne box to indicate an attachment	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER C	F SHARES				
		100		Common		None	
11. This report must be execut	ted on behalf of the	corporation by an	authorized repre	sentative. If the co	rporation is in the	hands of a receiver o	
trustee, this report must be ex					omnani inc ook	dulae and	
Under penalty of perjury, I d statements, and that all stat				neroung any acc	ompanying sche	บนเชร สกิน	
Name of Authorized Represen					Date	1 -	
Myles P. Flaherty, Presider	nt	n	£*	<u>i</u> ri	11 13/3	1117	
Signature of Authorized Repre	sentative.	1 Flat	enty	ADD	LED'	/	
	Y-20	1 1000		AFR	<u> </u>	······································	
MAIL TO: Division of Business Services 48 W. River Street, Providence, R	// Rhode Island 02904-26	15		BY B	167/05	555	

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 630 - Revised: 10/2016