



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.

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2017 APR 27 AM 11:31

1. Entity ID Number 000790169		2. Exact name of the Corporation LA HERNANDEZ DRYWALL CONSTRUCTION INC			
3. Principal Office Address 525 BROAD STQ		City CENTRAL FALLS	State RI	Zip 02863	
4. NAICS Code 23 - Construction	6. Brief description of the character of business conducted in Rhode Island CONSTRUCTION CONTRACTOR				
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name LUIS A HERNANDEZ		Vice-President Name INGRD HERNANDEZ			
Street Address 240 BAXTER ST		Street Address 240 BAXTER ST			
City PAWTUCKET	State RI	Zip 02861	City PAWTUCKET	State RI	Zip 02861
Secretary Name LUIS A HERNANDEZ		Treasurer Name INGRID HERNANDEZ			
Street Address 240 BAXTER ST		Street Address 240 BAXTER ST			
City PAWTUCKET	State RI	Zip 02861	City PAWTUCKET	State RI	Zip 02861
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			1000	STK	.01
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 INGRID HERNANDEZ					Date 4/27/17
Signature of Authorized Representative <i>Ingrid Hernandez</i>					

FILED

APR 27 2017

BY CK 302310