



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017- Amended

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

 R.I. DEPT. OF STATE
 BUS. SER. DIV.

2017 JUN -5 AM 10:59

1. Entity ID Number 899058		2. Exact name of the Corporation S&D General Construction Inc.			
3. Principal Office Address 27 Lotus PL			City Providence	State RI	Zip 02908
4. NAICS Code 23		6. Brief description of the character of business conducted in Rhode Island Construction			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Dulian Chacon			Vice-President Name		
Street Address 27 Lotus PL			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name Dulian Chacon			Treasurer Name		
Street Address Same			Street Address		
City	State	Zip	City	State	Zip
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 100	CLASS/SERIES	PAR VALUE 0
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 Dulian Chacon				Date 6/5/17	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	

FILED

JUN 05 2017

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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

June 05, 2017 10:59 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

