



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.

RECEIVED
R.I. DEPT. OF STATE
BUS. SERVICES 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 ☐					
President Name Julian Chacon			Vice-President Name		
Street Address 27 Lotus PL			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name Julian 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 ☐					
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		
			100		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 Julian Chacon					Date 6/5/17
Signature of Authorized Representative 					
SIGN DOCUMENT HERE					

FILED

JUN 05 2017

BY cc 10:59

MAIL TO:

Division of Business Services

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

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