nope:		ness Services					
Annual Report for the y)				20 22		
Corporation							
→ Filing period: January 1 → Filing Fee: \$50.00	- March 1					5 55:	
→ Penalty: Additional \$25.00	0 fee if form is r	not filed by April 1.	,				
1. Entity ID Number		me of the Corporation		· · · · · · · · · · · · · · · · · · ·		2000	
000140519	1	B & D Boiler Removal, Inc.					
3. Principal Office Address			City	· · · · · · · · · · · · · · · · · · ·	State	2 ₹ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
92 Farrell Street			Pawtucket	t	RI	0 2 861	
4. NAICS Code	 .			conducted in Rhode	Island		
<u> </u>	→ General co	nstruction include	ing boiler demo	olition and removal			
5. State of Incorporation RI	7	·					
7. List ALL officers (names and a	ddresses)			Chec	k the box to indi	icate an attachment 🔲	
President Name Robert Soucy			Vice-Preside	Daniel Desa			
Street Address 92 Farrell Street				Street Address 13 Consolation Avenue			
City Pawtucket	State RI	^{Zip} 02861	City Pawtuc	City Pawtucket State		^{Zip} 02861	
Secretary Name Brian Soucy		•	Treasurer Na	Treasurer Name			
Street Address 13 Consolation Av	venue	7 <u>4.</u> .	Street Addres	ss			
^{City} Pawtucket	State RI	Zip 02861	City		State	Zip	
8. List ALL directors (names and	addresses)		Total salas Name		the box to indir	cate an attachment	
Director Name Robert Soucy			Director Nam	Daniel Desautel			
Street Address 92 Farrell Street				ss 13 Consolation St	reet		
City Pawtucket	State RI	^{Zip} 02861		City Pawtucket		Zip 02861	
Director Name Brian Soucy	Director Name	6					
Street Address 13 Consolation St	•		Street Addres	is			
City Pawtucket	State RI	^{Zip} 02861	City		State	Zip	
9. Shares Authorized This information is currently of rec	and in the	10. Shares Iss	SUBO	Check CLASS/SERIE		cate an attachment	
Department of State.			<u> </u>	common		PAR VALUE	
Changes require an additional filing	g.	100	- 4 -		^	o hai saine	
11. This report must be executed	on behalf of the	corporation by an	authorized repre	sentative. If the corpo	oration is in the	hands of a receiver or	
trustee, this report must be execut Under penalty of perjury, I,decla	ited on behalf of are and affirm t	the corporation by that I have examin	the receiver or to ned this report, i	trustee.			
statements, and that all stateme Name of Authorized Representativ	ve ve	herein are true an	id correct.		Date		
Edward G. Lawson			7/14/2017				

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040

Website: www.sos.ri.gov