



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2018  
Corporation

- Filing period: January 1 - March 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by April 1.

**FILED**

DEC 26 2017

BY

15517 *[Signature]*

1. Entity ID Number <u>000068767</u>		2. Exact name of the Corporation <u>Nu-LOOK Seal Coating Company</u>												
3. Principal Office Address <u>PO Box 17306 / 3 Rocky Hill Rd</u>		City <u>Smithfield</u>		State <u>RI</u>	Zip <u>02917</u>									
4. NAICS Code <u>238990</u>		6. Brief description of the character of business conducted in Rhode Island <u>Asphalt paving &amp; seal coating services.</u>												
5. State of Incorporation <u>Rhode Island</u>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <u>David B. Harris</u>			Vice-President Name <u>David Passarelli</u>											
Street Address <u>200 Manley Dr</u>			Street Address <u>1 Karen Ann Dr</u>											
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City <u>Smithfield</u>	State <u>RI</u>	Zip <u>02917</u>									
Secretary Name <u>(Same as above)</u>			Treasurer Name <u>(Same as above)</u>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <u>David B. Harris</u>			Director Name <u>David Passarelli</u>											
Street Address <u>200 Manley Dr</u>			Street Address <u>1 Karen Ann Dr</u>											
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City <u>Smithfield</u>	State <u>RI</u>	Zip <u>02917</u>									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>												
This information is currently of record in the Department of State.  Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><u>400</u></td> <td><u>Common</u></td> <td><u>NPV</u></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<u>400</u>	<u>Common</u>	<u>NPV</u>			
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<u>400</u>	<u>Common</u>	<u>NPV</u>												
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 <u>David Harris</u>					Date <u>12/21/17</u>									
Signature of Authorized Representative <i>[Signature]</i>														