



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.

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV

2018 JAN 19 PM 12:30

1. Entity ID Number <b>15521</b>		2. Exact name of the Corporation <b>NEW ENGLAND STONE INDUSTRIES, INC.</b>			
3. Principal Office Address <b>15 BRANCH PIKE</b>			City <b>SMITHFIELD</b>	State <b>RI</b>	Zip <b>02917</b>
4. NAICS Code <b>327991</b>		6. Brief description of the character of business conducted in Rhode Island <b>MANUFACTURE AND SALE OF GRANITE</b>  NAICS CODE <b>327991</b>			
5. State of Incorporation <b>RHODE ISLAND</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>ANTONIO C. RAMOS</b>			Vice-President Name <b>ANTONIO C. RAMOS</b>		
Street Address <b>30 RELIANCE DRIVE</b>			Street Address <b>30 RELIANCE DRIVE</b>		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
Secretary Name <b>ANN MARIE RAMOS</b>			Treasurer Name <b>ANN MARIE RAMOS</b>		
Street Address <b>30 RELIANCE DRIVE</b>			Street Address <b>30 RELIANCE DRIVE</b>		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>ANTONIO C. RAMOS</b>			Director Name <b>NONE</b>		
Street Address <b>30 RELIANCE DRIVE</b>			Street Address		
City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>	City	State	Zip
Director Name <b>NONE</b>			Director Name <b>NONE</b>		
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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			<b>100</b>	<b>COMMON</b>	<b>NO PAR VALUE</b>
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 <b>ANTONIO C. RAMOS</b>					Date <b>1/8/18</b>
Signature of Authorized Representative 					<b>FILED</b>
					SIGN DOCUMENT HERE

JAN 19 2018

BY **10938 KM**