



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.

1. Entity ID Number 80249		2. Exact name of the Corporation A. GIORGI PLUMBING & HEATING, INC.												
3. Principal Office Address 27 Hunters Run			City North Providence	State RI	Zip 02904									
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island To do plumbing, water, gas and steam fitting of all kinds.												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Anthony J. Giorgi			Vice-President Name Anthony J. Giorgi											
Street Address 27 Hunters Run			Street Address 27 Hunters Run											
City North Providence	State RI	Zip 02904	City North Providence	State RI	Zip 02904									
Secretary Name Anthony J. Giorgi			Treasurer Name Anthony J. Giorgi											
Street Address 27 Hunters Run			Street Address 27 Hunters Run											
City North Providence	State RI	Zip 02904	City North Providence	State RI	Zip 02904									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name Anthony J. Giorgi			Director Name None											
Street Address 27 Hunters Run			Street Address											
City North Providence	State RI	Zip 02904	City	State	Zip									
Director Name None			Director Name None											
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 ☐												
		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par Value			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
100	Common	No Par Value												
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 Anthony J. Giorgi					Date 1-28-18									
Signature of Authorized Representative 														

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