



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 Corporate ID No 115966		2 Name of Corporation Ptaszek Construction, Inc.			
3 Street Address Principal Business Office 144 Hoyt Avenue			City Rumford	State RI	Zip 02916
4 NAICS Code 236118		5 State of Incorporation Rhode Island			
6 Brief Description of the Character of Business Conducted in Rhode Island To offer, provide, sell and otherwise deal in construction services to the public					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joseph Ptaszek			Vice President Name		
Street Address 144 Hoyt Avenue			Street Address		
City Rumford	State RI	Zip 02916	City	State	Zip
Secretary Name Joseph Ptaszek			Treasurer Name Joseph Ptaszek		
Street Address 144 Hoyt Avenue			Street Address 144 Hoyt Avenue		
City Rumford	State RI	Zip 02916	City Rumford	State RI	Zip 02916
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
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: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES - THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class Series	Par Value
			100 common shares \$1 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.

Joseph Ptaszek
 Signature

3/28/18
 Date

Joseph Ptaszek
 Print or Type Name

President

Title

FILED

APR 02 2018

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MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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