



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 AUG -7 AM 11:15

1. Entity ID Number 000141672		2. Exact name of the Corporation HAABCO CONSTRUCTION, INC.			
3. Principal Office Address 108 STERN STREET		City JAMESTOWN		State RI	Zip 02835
4. NAICS Code 236110	6. Brief description of the character of business conducted in Rhode Island REMODELING KITCHENS, BATHROOMS, AND ANY OTHER LAWFUL BUSINESS ACTIVITY				
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name SEAN JOUBERT			Vice-President Name SEAN JOUBERT		
Street Address 108 STERN STREET			Street Address 108 STERN STREET		
City JAMESTOWN	State RI	Zip 02835	City JAMESTOWN	State RI	Zip 02835
Secretary Name KATHRYN JOUBERT			Treasurer Name KATHRYN JOUBERT		
Street Address 108 STERN STREET			Street Address 108 STERN STREET		
City JAMESTOWN	State RI	Zip 02835	City JAMESTOWN	State RI	Zip 02835
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name SEAN JOUBERT			Director Name KATHRYN JOUBERT		
Street Address 108 STERN STREET			Street Address 108 STERN STREET		
City JAMESTOWN	State RI	Zip 02835	City JAMESTOWN	State RI	Zip 02835
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>			
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
1,000		COMMON		NO PAR	
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 SEAN JOUBERT				Date 8-6-18	
Signature of Authorized Representative 				FILED	

AUG 07 2018
BY 336419
A.A. 11:18 A.M.