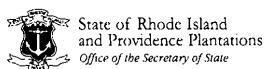
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A. Ralph Mollis, Secretary of State Corporations Division 148 W River Street

Providence, RI 02904-2615 401 222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I. G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

subject to a penalty fee of \$25.00.							
1 Corporate 11) No. OOO71789 PLAINFIELD LANDSCAPING CO., INC.							
3 Street Address Principal Business O 2071 PLAINFIEL	o PIKE	_	JOHNSTON	State R1	02919		
4 Business Phone No 946.	5090	5 State of Incorporation RHOD	DE ISLAND				
6 Brief Description of the Character of Bustness Conducted in Rhode Island 541320)							
7. NAMES AND ADDRESSES OF THE OPPICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS							
Presidenti Name	_		Vice President Name				
FRANK DEBELLIS			FRANK DEBELLIS				
2071 PLAINFIELD PIKE			2071 RAINFIELD PIKE				
JOHNSTON	State R \	82919	JOHNSTON	State R1	²¹⁰ 02919		
Secretary Name FRANK DEBELLIS			FRANK DEBELLIS				
Street Address 2071 PLAINFIELD PIKE CHY TOWN STON STON 2919			2071 PLAINFIELD PIKE				
JOHNSTON	State R 1	02919	JOHNSTON	State R	Zip 02919		
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT.	ACHMENT) 📗 FILL IN SPAC	CES BEFORE USING A	TTACHMENTS		
Director Name NONE			Director Name NONE				
Street Address			Street Address				
City	State	7.tp	City	State	Zψ		
Director Name NONE			Director Name NONE				
Stren Address			Street Address				
Cuj	State	Zıp	G _D	State	Zφ		
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) SSUED SHARES — THIS SECTION MUST BE COMPLETED				
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.			Number of Shares	Clas√Series	Par Value		
			100.	COMMON	NPV		
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.							
<u> </u>							

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File Date	
Check No.	R†
Ву	
ı	FOR SECRETARY OF STATE USE ONLY

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JAN	0 4	2019
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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements

Signature TRANK

Print or Type Name RESIDEN

Title