



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

2019

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 07 2019

BY 38576
QCA

1. Entity ID Number <u>000100073</u>		2. Exact name of the Corporation <u>Pagette Electric Company, Inc</u>	
3. Principal Office Address <u>368 Killingly Rd</u>		City <u>Pomfret Center</u>	State <u>CT</u>
4. NAICS Code <u>238210</u>		6. Brief description of the character of business conducted in Rhode Island <u>Electrical contracting.</u>	
5. State of Incorporation <u>CT</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>Michael Pantuosco</u>		Vice-President Name <u>George Drew</u>	
Street Address <u>4 Dogwood Lane</u>		Street Address <u>125 Cushman Rd</u>	
City <u>Ellington</u>	State <u>CT</u>	City <u>Ashford</u>	State <u>CT</u>
Zip <u>06029</u>		Zip <u>06278</u>	
Secretary Name <u>Nicole Walker</u>		Treasurer Name <u>Michael Pantuosco</u>	
Street Address <u>19 East Putnam Rd</u>		Street Address <u>4 Dogwood Lane</u>	
City <u>Putnam</u>	State <u>CT</u>	City <u>Ellington</u>	State <u>CT</u>
Zip <u>06260</u>		Zip <u>06029</u>	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name <u>Michael Pantuosco</u>		Director Name <u>George Drew</u>	
Street Address <u>4 Dogwood Lane</u>		Street Address <u>125 Cushman Rd</u>	
City <u>Ellington</u>	State <u>CT</u>	City <u>Ashford</u>	State <u>CT</u>
Zip <u>06029</u>		Zip <u>06278</u>	
Director Name <u>Carla Pantuosco</u>		Director Name <u>Andrew Pantuosco</u>	
Street Address <u>15 Province St Unit 911</u>		Street Address <u>20 Janie Dr</u>	
City <u>Boston</u>	State <u>MA</u>	City <u>Holland</u>	State <u>MA</u>
Zip <u>02108</u>		Zip <u>01521</u>	
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 <input type="checkbox"/>	
		NUMBER OF SHARES <u>100</u>	
		CLASS/SERIES <u>C</u>	
		PAR VALUE <u></u>	
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 <u>Michael Pantuosco</u>		Date <u>1-3-19</u>	
Signature of Authorized Representative <u>Michael Pantuosco</u>		SIGN DOCUMENT HERE	

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov