



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.

1. Entity ID Number 80394		2. Exact name of the Corporation A. Autiello Constuction Co., Inc.			
3. Principal Office Address 125 Carlsbad Street			City Cranston	State RI	Zip 02920
4. Business Phone Number 401-942-6822		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island commercial and industrial construction and all other lawful purposes					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Anthony E. Autiello, Jr.			Vice-President Name Anthony E. Autiello, III		
Street Address 125 Carlsbad Street			Street Address 125 Carlsbad Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Anthony E. Autiello, Jr.			Treasurer Name Anthony E. Autiello, III		
Street Address 125 Carlsbad Street			Street Address 125 Carlsbad Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Anthony E. Autiello, Jr.			Director Name Anthony E. Autiello, III		
Street Address 125 Carlsbad Street			Street Address 125 Carlsbad Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
9. Shares Authorized		1. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. 600 common no par value Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		600		common	
				PAR VALUE	
				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 E. Autiello, Jr., President					Date 1/3/19
Signature of Authorized Representative <i>Anthony E. Autiello, Jr. pres.</i>					

SIGN DOCUMENT HERE

FILED

JAN 28 2019

BY 23378

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