



State of Rhode Island and Providence Plantations
 Department of State - Business Services Division

FILED

MAR-13 2019

BY

5917

[Signature]

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 000487675		2. Exact name of the Corporation OCEAN STATE CONSTABLE SERVICES, INC			
3. Principal Office Address 143 SUDBURY LANE		City N. SCITUATE	State RI	Zip 02857	
4 NAICS Code 541199	6. Brief description of the character of business conducted in Rhode Island CONSTABLE SERVICES				
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name ROBERT S. SERRAELLI		Vice-President Name CHEYL A. SERRAELLI			
Street Address 143 SUDBURY LANE		Street Address 143 SUDBURY LANE			
City N. SCITUATE	State RI	Zip 02857	City N. SCITUATE	State RI	Zip 02857
Secretary Name ROBERT S. SERRAELLI		Treasurer Name CHEYL A. SERRAELLI			
Street Address 143 SUDBURY LANE		Street Address 143 SUDBURY LANE			
City N. SCITUATE	State RI	Zip 02857	City N. SCITUATE	State RI	Zip 02857
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name ROBERT S. SERRAELLI		Director Name CHEYL A. SERRAELLI			
Street Address 143 SUDBURY LANE		Street Address 143 SUDBURY LANE			
City N. SCITUATE	State RI	Zip 02857	City N. SCITUATE	State RI	Zip 02857
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued 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.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		0			
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 Robert S. Serraelli				Date 3-11-19	
Signature of Authorized Representative Robert S. Serraelli				SIGN DOCUMENT HERE	