



Department of State - Business Services Division

Annual Report for the year: 2018  
 Corporation

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 SECRETARY OF STATE  
 CORPORATIONS DIV  
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- 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 <b>080019236</b>		2. Exact name of the Corporation <b>Imperial Tile + Marble Works Inc</b>			
3. Principal Office Address <b>1006 Charles St</b>			City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>
4. NAICS Code <b>238340</b>		6. Brief description of the character of business conducted in Rhode Island <b>Sale of Tile + granite</b>			
5. State of Incorporation <b>R.I</b>					
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Joseph DeSantis</b>			Vice-President Name <b>PAUL DeSantis</b>		
Street Address <b>37 West River Pkwy</b>			Street Address <b>31 FAIR OAKS DR</b>		
City <b>N Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Joseph DeSantis</b>			Director Name <b>Paul DeSantis</b>		
Street Address <b>37 West River Pkwy</b>			Street Address <b>31 FAIR OAKS DR</b>		
City <b>N Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		PAR VALUE
			CLASS/SERIES		
			<b>150</b>	<b>Common</b>	<b>0.00</b>
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.					
<b>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.</b>					
Name of Authorized Representative <b>Joseph DeSantis</b>					Date <b>1/27/19</b>
Signature of Authorized Representative 					<b>FILED</b>

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

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