



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 796356	2. Exact name of the Corporation ALTERISIO CONSTRUCTION INC		
3. Principal Office Address 1 PRESIDENTIAL WAY STE 102		City WOBURN	State MA
		Zip 01801	
4. NAICS Code 236117	6. Brief description of the character of business conducted in Rhode Island GENERAL CONTRACTOR		
5. State of Incorporation MA			

7. List ALL officers (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>	
President Name JOHN ALTERISIO		Vice-President Name			
Street Address 2 PLEASANT ST		Street Address			
City BURLINGTON	State MA	Zip 01803	City	State	Zip
Secretary Name PATRICIA ALTERISIO		Treasurer Name			
Street Address 2 PLEASANT ST		Street Address			
City BURLINGTON	State MA	Zip 01803	City	State	Zip

8. List ALL directors (names and addresses)				Check the box to indicate an attachment <input type="checkbox"/>	
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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	
		100	CNP	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 PATRICIA ALTERISIO		Date 3-25-19
Signature of Authorized Representative <i>Patricia Alterisio</i>		FILED

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

FILED
 MAR 26 2019
 BY **SDFWJ**
A.A. 11:56 AM
 FORM 630 - Revised: 10/2017