



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

FILED

JUL 15 2019 *DS*

BY 216063

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 1681903		2. Exact name of the Corporation ALC Building Company, Inc.			
3. Principal Office Address 150 Beachwood Drive			City East Greenwich	State RI	Zip 02818
4. NAICS Code 53139		6. Brief description of the character of business conducted in Rhode Island Real estate holding company			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Armand Cortelleso			Vice-President Name None		
Street Address 150 Beachwood Drive			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Secretary Name Armand Cortelleso			Treasurer Name Armand Cortelleso		
Street Address 150 Beachwood Drive			Street Address 150 Beachwood Drive		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			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
		25		Common	\$.01
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. <i>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.</i>					
Name of Authorized Representative Armand Cortelleso					Date July 11, 2019
Signature of Authorized Representative 					SIGN DOCUMENT HERE

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov