



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.

RECEIVED  
SECRETARY OF STATE  
CORPORATION DIVISION

2019 AUG -6 PM 12:51

1. Entity ID Number <b>3891</b>		2. Exact name of the Corporation <b>Central Landscape Construction Company</b>												
3. Principal Office Address <b>1155 Atwood Avenue</b>			City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
4. NAICS Code <b>561730</b>		6. Brief description of the character of business conducted in Rhode Island <b>Landscape, contracting and construction.</b>												
5. State of Incorporation <b>Rhode Island</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>Paul Pagliarini</b>			Vice-President Name <b>James Pagliarini</b>											
Street Address <b>1155 Atwood Avenue</b>			Street Address <b>1155 Atwood Avenue</b>											
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
Secretary Name <b>James Pagliarini</b>			Treasurer Name <b>Paul Pagliarini</b>											
Street Address <b>1155 Atwood Avenue</b>			Street Address <b>1155 Atwood Avenue</b>											
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
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>Paul Pagliarini</b>			Director Name <b>Gregory Pagliarini</b>											
Street Address <b>1155 Atwood Avenue</b>			Street Address <b>1155 Atwood Avenue</b>											
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
Director Name <b>James Pagliarini</b>			Director Name											
Street Address <b>1155 Atwood Avenue</b>			Street Address											
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>300</td> <td>Common</td> <td>No Par</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	300	Common	No Par			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
300	Common	No Par												
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>Paul Pagliarini</b>				Date <b>6/16/2017</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

AUG 06 2019  
BY H F JRY  
AA

FORM 630 - Revised: 02/2017