


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

FILED

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ANNUAL REPORT FOR THE YEAR 2020
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. Corporate ID No. 95416		2. Name of Corporation SAL CARBONE GENERAL CONTRACTING INC.			
3. Street Address Principal Business Office 23 Red Oak Drive			City Cranston	State RI	Zip 02921
4. NAICS Code 236118		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island General contracting					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Salvatore J. Carbone			Vice President Name		
Street Address 23 Red Oak Drive			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
Secretary Name Brenda J. Carbone			Treasurer Name Salvatore J. Carbone		
Street Address 23 Red Oak Drive			Street Address 23 Red Oak Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
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: ("X" BOX FOR ATTACHMENT) ☐					
10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) ☐					
ISSUED SHARES – THIS SECTION MUST BE COMPLETED					
Number of Shares		Class/Series		Par Value	
200 shares common stock of no par value					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.					

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.

 Signature: *Salvatore J. Carbone*

Date

Salvatore J. Carbone

Print or Type Name

President

Title