



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

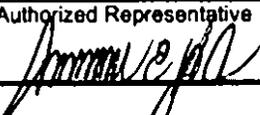
**FILED**

MAR 02 2020

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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. Entity ID Number<br><b>58893</b>   |                    | 2. Exact name of the Corporation<br><b>H &amp; H Trucking, Inc.</b>                             |   |                    |                          |
| 3. Principal Office Address<br><b>PO Box 3752</b>   |                    |   | City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>      |
| 4. NAICS Code<br><b>484110</b>  |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Trucking.</b> |   |                    |                          |
| 5. State of Incorporation<br><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<br><b>William E. Hogan, III</b>  |                    |   | Vice-President Name<br><b>Ryan Hogan</b>  |                    |                          |
| Street Address<br><b>81 Pilsudski Street</b>  |                    |   | Street Address<br><b>81 Pilsudski Street</b>  |                    |                          |
| City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>   | City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>      |
| Secretary Name<br><b>Ryan Hogan</b>   |                    |   | Treasurer Name<br><b>William E. Hogan, III</b>  |                    |                          |
| Street Address<br><b>81 Pilsudski Street</b>  |                    |   | Street Address<br><b>81 Pilsudski Street</b>  |                    |                          |
| City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>   | City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>      |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>  |                    |   |   |                    |                          |
| Director Name<br><b>William E. Hogan, III</b>   |                    |   | Director Name<br><b>Ryan Hogan</b>  |                    |                          |
| Street Address<br><b>81 Pilsudski Street</b>  |                    |   | Street Address<br><b>81 Pilsudski Street</b>  |                    |                          |
| City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</b>   | City<br><b>Providence</b>   | State<br><b>RI</b> | Zip<br><b>02909</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.<br><br>Changes require an additional filing.  |                    |   | NUMBER OF SHARES  |                    |                          |
|   |                    |   | CLASS/SERIES  |                    |                          |
|   |                    |   | <b>1,000</b>  |                    | <b>Common</b>            |
|   |                    |   |   |                    | <b>No par value</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.<br>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<br><b>William E. Hogan, III</b>   |                    |   |   |                    | Date<br><b>2/26/2020</b> |
| Signature of Authorized Representative<br>   |                    |   |   |                    | SIGN DOCUMENT HERE       |

MAIL TO:  
 Division of Business Services  
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 Phone: (401) 222-3040  
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