



RI SOS Filing Number: 202069760860 Date: 10/28/2020 11:49:00 AM

State of Rhode Island

Department of State - Business Services Division

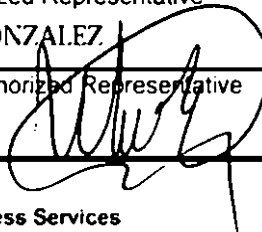
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R.I. DEPT. OF STATE
BUS SVCS DIV STAMP

Annual Report for the year: 2018

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

2020 OCT 28 A 11:42

1. Entity ID Number 000163626		2. Exact name of the Corporation RIVERA-G TRUCKING, INC.									
3. Principal Office Address 60 HERBERT STREET			City PROVIDENCE	State RI	Zip 02909						
4. NAICS Code 484230		6. Brief description of the character of business conducted in Rhode Island TRANSPORTATION									
5. State of Incorporation RI											
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐											
President Name WALTER G GONZALEZ			Vice-President Name SAME								
Street Address 60 HERBERT STREET			Street Address								
City PROVIDENCE	State RI	Zip 02909	City	State	Zip						
Secretary Name SAME			Treasurer Name SAME								
Street Address			Street Address								
City	State	Zip	City	State	Zip						
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐											
Director Name SAME			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 Check the box to indicate an attachment ☐											
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued								
			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> <tr> <td>1000</td> <td>COMMON</td> <td>NPV</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1000	COMMON	NPV
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
1000	COMMON	NPV									
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 WALTER G GONZALEZ				Date 10-28-2020							
Signature of Authorized Representative 				FILED OCT 28 2020							

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

BY CH WOLF
11:49