



State of Rhode Island
Department of State - Business Services Division

FILED

JAN 21 2021 STAMP
 BY *[Signature]* FOR *[Signature]*

Annual Report for the year: 2021
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 000061998		2. Exact name of the Corporation MURANO MASONRY, INC			
3. Principal Office Address 129 Tower Street			City Westerly	State RI	Zip 02891
4. NAICS Code 238140		6. Brief description of the character of business conducted in Rhode Island Masonry, stone work and any other lawful purpose.			
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 Philip J. Murano, Jr.			Vice-President Name Philip J. Murano, Jr.		
Street Address 129 Tower Street			Street Address 129 Tower Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name Philip J. Murano, Jr.			Treasurer Name Philip J. Murano, Jr.		
Street Address 129 Tower Street			Street Address 129 Tower Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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			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
			None		
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 Philip J. Murano, Jr.				Date 1.19.21	
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:
 Division of Business Services
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