RI SOS Filing Number: 202190675370 Date: 2/10/2021 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 FEB 10 A 11:50

1. Entity ID Number	2. Exact name of the Corporation
000105393	VOTTA CONSTRUCTION, INC.

3. Principal Office Address	City	State	Zip
91 Trent Avenue	Warwick	RI	02888

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
212321	To Operate a Construction Company for the Building and Renovation of Homes and Other Structures for Sale or for use by the General Public
5. State of Incorporation	
Rhode Island	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
Timothy Votta			Timothy Votta		
Street Address: 91 Trent Avenue			Street Address: 91 Trent Avenue		
City: Warwick	State: RI	Zip: 02888	City: Warwick	State: RI	Zip: 02888
Secretary Name: Timothy Votta			Treasurer Name: Timothy Votta		
Street Address: 91 Trent Avenue			Street Address: 91 Trent Avenue		
City: Warwick	State: RI	Zip: 02888	City: Warwick	State: RI	Zip: 02888

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name			Director Name		
None					
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

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	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

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	Date
Timothy Votta, President	1/30/21

Signature of Authorized Representative: Timothy Votta Per Votta Cus Fore SIGN DOCUMENT HERE

FILED

FEB 10 2021

BY Ck Ck# 3349

11:50

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

FORM 630 - Revised: 10/2017