



State of Rhode Island

## 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.

FILED

MAR 01 2021

BY 027553

RECEIVED

JAN 19 2021

DANIEL KOURY  
CONSTRUCTION INC.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             |                                                                                                                                                 |                                                                                    |                   |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------|--------------|
| 1. Entity ID Number<br>71445                                                                                                                                                                                                                                                                                                                                                                                                                              |             | 2. Exact name of the Corporation<br>DANIEL KOURY CONSTRUCTION, INC. OS                                                                          |                                                                                    |                   |              |
| 3. Principal Office Address<br>93 Gilbane Street                                                                                                                                                                                                                                                                                                                                                                                                          |             |                                                                                                                                                 | City<br>Warwick                                                                    | State<br>RI       | Zip<br>02886 |
| 4. NAICS Code<br>212321                                                                                                                                                                                                                                                                                                                                                                                                                                   |             | 6. Brief description of the character of business conducted in Rhode Island<br>BUILDING, CONSTRUCTION AND DEVELOPMENT OF ALL TYPES OF BUILDINGS |                                                                                    |                   |              |
| 5. State of Incorporation<br>Rhode Island                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                                                                                                 |                                                                                    |                   |              |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                               |             |                                                                                                                                                 |                                                                                    |                   |              |
| President Name<br>Daniel Koury                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                                                                                                                                                 | Vice-President Name<br>Vacant                                                      |                   |              |
| Street Address<br>36 Congdon Street                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                                                                 | Street Address                                                                     |                   |              |
| City<br>Narragansett                                                                                                                                                                                                                                                                                                                                                                                                                                      | State<br>RI | Zip<br>02852                                                                                                                                    | City                                                                               | State             | Zip          |
| Secretary Name<br>Daniel Koury                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                                                                                                                                                 | Treasurer Name<br>Daniel Koury                                                     |                   |              |
| Street Address<br>36 Congdon Street                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                                                                 | Street Address<br>36 Congdon Street                                                |                   |              |
| City<br>Narragansett                                                                                                                                                                                                                                                                                                                                                                                                                                      | State<br>RI | Zip<br>02852                                                                                                                                    | City<br>Narragansett                                                               | State<br>RI       | Zip<br>02852 |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                              |             |                                                                                                                                                 |                                                                                    |                   |              |
| Director Name<br>Daniel Koury                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                                                                 | Director Name                                                                      |                   |              |
| Street Address<br>36 Congdon Street                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                                                                 | Street Address                                                                     |                   |              |
| City<br>Narragansett                                                                                                                                                                                                                                                                                                                                                                                                                                      | State<br>RI | Zip<br>02852                                                                                                                                    | 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.<br><br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                                          |             |                                                                                                                                                 | NUMBER OF SHARES CLASS/SERIES PAR VALUE                                            |                   |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             |                                                                                                                                                 | 500                                                                                | 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.<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>DANIEL KOURY                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                                                                                                 |                                                                                    | Date<br>1/14/2021 |              |
| Signature of Authorized Representative<br><i>Daniel Koury</i>                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                                                                 |                                                                                    |                   |              |

## MAIL TO:

Division of Business Services

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