RI SOS Filing Number: 202193724660 Date: 3/8/2021 4:00:00 PM



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

1. Entity ID Number	2. Exact nam	2. Exact name of the Corporation					
517048	JD Plasterin	JD Plastering Inc					
3. Principal Office Address		<u> </u>	City		State	Zip	
30 Roundway Dr			Coventry		RI	02816	
4. NAICS Code 236118		Brief description of the character of business conducted in Rhode Island Drywall & Plastering					
5. State of Incorporation RI			111		_		
7. List ALL officers (names and a	ddresses)				ck the box to ind	icate an attachment	
President Name Joao Domingos			Vice-President Name				
Street Address 30 Roundway Dr			Street Address				
City Coventry	State RI	^{Zip} 02816	City		State	Zip	
Secretary Name			Treasurer Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
8. List ALL directors (names and	addresses)			Che	ck the box to inc	licate an attachment	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zıp	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized	10. Shares iss				ick the box to indicate an attachment		
This information is currently of record in the		NUMBER C	F SHARES	CLASS/SE CNP	R:ES	PAR VALUE	
Department of State.		100	100			0	
Chänges require an additional filir	ng.						
11. This report must be executed					rporation is in th	e hands of a receiver or	
trustee, this report must be exec	uted on behalf o	f the corporation by	the receiver or	trustee.	companying ec	hedules and	
Under penalty of perjury, I dec statements, and that all staten	:iare and aπirm nents contained	tnat i nave examir i herein are true ai	nea this report, nd correct.	including any acc	ompanying sci		
Name of Authorized Representative					Date		
Joao Domingos				2/26/21			
Signature of Authorized Represe	entative	<u></u>	· _ ,				
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov