



State of Rhode Island

## Department of State - Business Services Division

FILED

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.

MAR 17 2021

BY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                |                                                                    |                                                                  |                    |                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------|--------------------|------------------------------------------------------------------|
| 1. Entity ID Number<br>59516                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                | 2. Exact name of the Corporation<br>Matarese landscape const. inc. |                                                                  |                    |                                                                  |
| 3. Principal Office Address<br>66 village ave.                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                |                                                                    | City<br>cranston                                                 | State<br>r.i.      | Zip<br>02920-4329                                                |
| 4. NAICS Code<br>561730                                                                                                                                                                                                                                                                                                                                                                                                                                          | 6. Brief description of the character of business conducted in Rhode Island<br>landscape construction.maintenance and commercial snow plowing. |                                                                    |                                                                  |                    |                                                                  |
| 5. State of Incorporation<br>R.I.                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                                                                    |                                                                  |                    |                                                                  |
| 7. List ALL officers (names and addresses)                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                |                                                                    |                                                                  |                    | Check the box to indicate an attachment <input type="checkbox"/> |
| President Name<br>Anthony Matarese Jr.                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                |                                                                    | Vice-President Name<br>same                                      |                    |                                                                  |
| Street Address<br>66 VILLAGE AVE.                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                                                                    | Street Address                                                   |                    |                                                                  |
| City<br>CRANSTON                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br>R.I.                                                                                                                                  | Zip<br>02920                                                       | City                                                             | State              | Zip                                                              |
| Secretary Name<br>same                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                |                                                                    | Treasurer Name<br>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 <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                                                |                    |                                                                  |
| This information is currently of record in the Department of State.<br><br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                |                                                                    | Check the box to indicate an attachment <input type="checkbox"/> |                    |                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                |                                                                    | NUMBER OF SHARES                                                 | CLASS/SERIES       | PAR VALUE                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                |                                                                    | 1.000                                                            | comm. no           | no                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                |                                                                    |                                                                  | par value          |                                                                  |
| 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><b>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.</b> |                                                                                                                                                |                                                                    |                                                                  |                    |                                                                  |
| Name of Authorized Representative<br>Anthony Matarese Jr.                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                |                                                                    |                                                                  | Date<br>03/10/2021 |                                                                  |
| Signature of Authorized Representative<br><i>Anthony Matarese Jr.</i> PRES.                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                |                                                                    |                                                                  |                    |                                                                  |