



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2022  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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BY 3450

1. Entity ID Number <b>19381</b>		2. Exact name of the Corporation <b>Ziggy's Sons Construction, Inc.</b>			
3. Principal Office Address <b>c/o Gaschen Law Offices, 180 Little Pond County Rd</b>			City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
4. NAICS Code <b>238110</b>		6. Brief description of the character of business conducted in Rhode Island <b>Concrete Form Business</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>John Pawluch</b>			Vice-President Name <b>John Pawluch</b>		
Street Address <b>POB 7695</b>			Street Address <b>POB 7695</b>		
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Secretary Name <b>John Pawluch</b>			Treasurer Name <b>Sandra Pawluch</b>		
Street Address <b>POB 7695</b>			Street Address <b>POB 7695</b>		
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			C. ASSISPRIF5		
			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.					
<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 <b>John Pawluch</b>					Date
Signature of Authorized Representative 					