



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

FILED STAMP

FEB 09 2023

BY 1041

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001742056		2. Exact name of the Corporation Paolino Plumbing & Heating, Inc.			
3. Principal Office Address 140 Highland Street			City Cranston	State RI	Zip 02920
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island Plumbing and Heating Services			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Donald V Paolino			Vice-President Name Donald V Paolino		
Street Address 140 Highland Street			Street Address 140 Highland Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Donald V Paolino			Treasurer Name Donald V Paolino		
Street Address 140 Highland Street			Street Address 140 Highland Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
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 Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100 Shares	Common	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. 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 Donald V Paolino				Date 2/6/23	
Signature of Authorized Representative 					

MAIL TO:
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