



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

FEB 08 2023

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- 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<br>000139307  |             | 2. Exact name of the Corporation<br>Foster Excavation <u>INC.</u>   |   |                 |              |
| 3. Principal Office Address<br>21 Green Street Unit 6   |             |   | City<br>Johnston  | State<br>RI     | Zip<br>02919 |
| 4. NAICS Code<br><u>238910</u>  |             | 6. Brief description of the character of business conducted in Rhode Island<br>To provide excavation services |   |                 |              |
| 5. State of incorporation<br>RI   |             |   |   |                 |              |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |             |   |   |                 |              |
| President Name<br>Lucas Dallesandro   |             |   | Vice-President Name<br>Lucas Dallesandro  |                 |              |
| Street Address<br>21 Green Street Unit 6  |             |   | Street Address<br>21 Green Street Unit 6  |                 |              |
| City<br>Johnston  | State<br>RI | Zip<br>02919  | City<br>Johnston  | State<br>RI     | Zip<br>02919 |
| Secretary Name<br>Lucas Dallesandro   |             |   | Treasurer Name<br>Lucas Dallesandro   |                 |              |
| Street Address<br>21 Green Street Unit 6  |             |   | Street Address<br>21 Green Street Unit 6  |                 |              |
| City<br>Johnston  | State<br>RI | Zip<br>02919  | City<br>Johnston  | State<br>RI     | Zip<br>02919 |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |             |   |   |                 |              |
| Director Name<br>Lucas Dallesandro  |             |   | Director Name   |                 |              |
| Street Address<br>21 Green Street Unit 6  |             |   | Street Address  |                 |              |
| City<br>Johnston  | State<br>RI | Zip<br>02919  | 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.<br>Changes require an additional filing.  |             |   | NUMBER OF SHARES  | CLASSIFRIES     | PAR VALUE    |
|   |             |   | 8,000   |                 |              |
| 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<br>Lucas Dallesandro  |             |   |   | Date<br>1/26/23 |              |
| Signature of Authorized Representative<br>  |             |   |   |                 |              |

MAIL TO:  
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