



State of Rhode Island

Department of State - Business Services Division

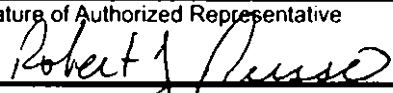
Annual Report for the year: 2023
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

FILED
FEB 21 2023
BY 11458
09

1. Entity ID Number 75532		2. Exact name of the Corporation R.J. Russo Excavating, Inc.			
3. Principal Office Address 121 Woodville Alton Rd.		City Hope Valley		State RI	Zip 02832
4. NAICS Code 23 1110		6. Brief description of the character of business conducted in Rhode Island Excavation			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Robert J. Russo			Vice-President Name Cindy L. Russo		
Street Address 121 Woodville Alton Rd.			Street Address 121 Woodville Rd.		
City Hope Valley	State RI	Zip 02832	City Hope Valley	State RI	Zip 02832
Secretary Name Robert J. Russo			Treasurer Name Cindy L. Russo		
Street Address 121 Woodville Rd.			Street Address 121 Woodville Rd.		
City Hope Valley	State RI	Zip 02832	City Hope Valley	State RI	Zip 02832
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
		1,000 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 Robert J. Russo					Date 02/10/2023
Signature of Authorized Representative 					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 630 - Revised: 2/2023