



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 28 2023

BY Glelel DS

1. Entity ID Number 8171		2. Exact name of the Corporation P.J.R. CONSTRUCTION, INC.												
3. Principal Office Address 448 PARK AVENUE			City PORTSMOUTH	State RI	Zip 02871									
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN GENERAL CONSTRUCTION												
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 PETER J. RAPOSA			Vice-President Name PETER J. RAPOSA											
Street Address 448 PARK AVENUE			Street Address 448 PARK AVENUE											
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871									
Secretary Name PETER J. RAPOSA			Treasurer Name PETER J. RAPOSA											
Street Address 448 PARK AVENUE			Street Address 448 PARK AVENUE											
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name N/A			Director Name N/A											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name N/A			Director Name N/A											
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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>COMMON</td> <td>NO PAR</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	COMMON	NO PAR			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
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. 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 PETER J. RAPOSA, PRESIDENT					Date 2/23/23									
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