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State of Rhode Island

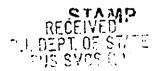
## Department of State - Business Services Division

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.					2023 HAR -2 A 8: 34			
1. Entity ID Number 001688617	2. Exact name of the Corporation J RAMIREZ CONSTRUCTION CORP							
3. Principal Office Address 513 HUNT ST APT 1			City CENTRA	L FALLS	State RI	Zip 02863		
4. NAICS Code 238100	6. Brief description of the character of business conducted in Rhode Island CONSTRUCTION REMODELING COMMERCIAL AND RESIDENTIAL							
5. State of Incorporation RHODE ISLAND								
7. List ALL officers (names and addresses) President Name RICARDO RAMIREZ			Check the box to indicate an attachment  Vice-President Name SAME					
Street Address 513 HUNT ST A	Street Address							
<sup>City</sup> CENTRAL FALLS	State RI	<sup>Zip</sup> 02863	City		State	Zip		
Secretary Name SAME			Treasurer Name					
Street Address				Street Address				
City	State	Zip	City		State	Zip		
8. List ALL directors (names and ac	dresses)			Check th	ne box to in	dicate an attachment 🔲		
Director Name SAME			Director Name					
Street Address	Address			Street Address				
City	State	Zıp	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zip	City		State	Zip		
9. Shares Authorized		10. Shares Issue						
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SI	HARES	CLASS/SFRIFS	T	PAR VALUE		
		100				NON PAR		
11. This report must be executed or	n hehalf of the cor	noration by an aut	horized repres	sentative. If the cornors	ation is in th	ne hands of a receiver or		
trustee, this report must be executed of					20011131111	ie nands of a receiver of		
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	•				Date			
RICARDO RAMIREZ	FILED 27 03/01/2023					2023		
Signature of Authorized Representative  (FC - 1 - Page 1982)  MAR 0 2 2023								
		7	-	1101011				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov BY VYV T