



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

STAMP

MAR 03 2023

FOR
SECRETARY OF STATE
USE ONLY

BY

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DS

1. Entity ID Number 001698334		2. Exact name of the Corporation Diorio Electric Co.			
3. Principal Office Address 495 Douglas Hook Road			City Gloucester	State RI	Zip 02814
4. NAICS Code 335999		6. Brief description of the character of business conducted in Rhode Island provide electrical services and any ancillary services			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Joseph A. Diorio, III			Vice-President Name		
Street Address 495 Douglas Hook Road			Street Address		
City Gloucester	State RI	Zip 02814	City	State	Zip
Secretary Name Joseph A. Diorio, III			Treasurer Name Joseph A. Diorio, III		
Street Address 495 Douglas Hook Road			Street Address 495 Douglas Hook Road		
City Gloucester	State RI	Zip 02814	City Gloucester	State RI	Zip 02814
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 Common with 0.01 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 Joseph A. Diorio, III					Date 2/28/2023
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