



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.

STAMP

RECEIVED
R.I. DEPT. OF STATE
FOR SECRETARY OF STATE
USE ONLY

2023 MAR 11 12:00

1. Entity ID Number 115966		2. Exact name of the Corporation Ptaszek Construction, Inc.			
3. Principal Office Address 21 Tiger Lily Trail		City Rehoboth		State MA	Zip 02769
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island To offer, provide, sell and otherwise deal in construction services to the public			
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 Ptaszek			Vice-President Name		
Street Address 21 Tiger Lily Trail			Street Address		
City Rehoboth	State MA	Zip 02769	City	State	Zip
Secretary Name Joseph Ptaszek			Treasurer Name		
Street Address 21 Tiger Lily Trail			Street Address		
City Rehoboth	State MA	Zip 02769	City	State	Zip
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 Shares with 1 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 Joseph Ptaszek					Date 2/27/23
Signature of Authorized Representative <i>Joseph Ptaszek</i>					

FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.govMAR 14 2023
BY ML 96C 4D