



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

APR 26 2023

STAMP

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

133000 *[Signature]*
FOR SECRETARY OF STATE USE ONLY

1. Entity ID Number 000118420		2. Exact name of the Corporation Phillips Plumbing and Mechanical, Inc.			
3. Principal Office Address 313 WARWICK AVENUE			City Cranston	State RI	Zip 02905
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island To carry out a general plumbing, heating and contracting business in all its branches residential, commercial and industrial			
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 John Phillips			Vice-President Name		
Street Address 21 Aumond Street			Street Address		
City Cranston	State RI	Zip 02905	City	State	Zip
Secretary Name John Phillips			Treasurer Name John Phillips		
Street Address 21 Aumond Street			Street Address 21 Aumond Street		
City Cranston	State RI	Zip 02905	City Cranston	State RI	Zip 02905
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			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100			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 John Phillips				Date 4/21/2023	
Signature of Authorized Representative <i>John Phillips, President</i>					