



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

APR 27 2023

BY MM
ps

1. Entity ID Number 000685889		2. Exact name of the Corporation Brian Vivieros Contracting, Inc	
3. Principal Office Address 30 Chace Terrace		City Portsmouth	State RI
		Zip 02871	
4. NAICS Code 236118	6. Brief description of the character of business conducted in Rhode Island All lawful activities and ancillary activities relating to the construction and rehabilitation of residential and commercial properties as restricted by the bylaws		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Brian Vivieros		Vice-President Name Brian Vivieros	
Street Address 30 Chace Terrace		Street Address 30 Chace Terrace	
City Portsmouth	State RI	City Portsmouth	State RI
Zip 02871		Zip 02871	
Secretary Name Brian Vivieros		Treasurer Name Brian Vivieros	
Street Address 30 Chace Terrace		Street Address 30 Chace Terrace	
City Portsmouth	State RI	City Portsmouth	State RI
Zip 02871		Zip 02871	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Brian Vivieros		Director Name	
Street Address 30 Chace Terrace		Street Address	
City Portsmouth	State RI	City	State
Zip 02871		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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.		NUMBER OF SHARES	
Changes require an additional filing.		CLASS/SERIES	
		PAR VALUE	
		100	Stk
			.01
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 Brian Vivieros, President			Date 04/24/2023
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