RI SOS Filing Number: 202336316840 Date: 5/30/2023 4:00:00 PM

nnual Report for the year:				REC	FIVED		
→ Filing period: February	RECEIVED 3.1. DEPT. OF STATE 513 SYCS DIV						
→ Filing Fee: \$50.00 → Penalty: Additional \$25.0	00 fee if form is r	not filed by May 31.			•		
Entity ID Number		ne of the Corporation		- 2023 HAY 3	<del>0 ₽ 12: 3u</del>		
200539472	Mar	195 Consti	ruction	. Inc			
Principal Office Address	,		City		State	Zip	
2 Hartman			VS+ 6	larwick	.   K	0285	
NAICS Code	6. Brief desc	cription of the charact	er of business co	nducted in Rhode	Ísland		
238400		,	,				
tate of Incorporation			Hon				
Tin All officer (some and	addresses)		<del></del> -	Charlesha I	Thu An Indiana an	-Wb	
List ALL officers (names and addresses)			Check the box to indicate an attachment ☐  Vice President Name				
Bahtier Sartov			Bantier Saitor				
2 Hartman ct			Street Address				
w. worwick	State	2ip 02 8 9 3	City		State	Zip	
ecretary Name	• • • • • • • • • • • • • • • • • • • •	102 9 3 2	Treasurer Name		1		
Baktier Saltor			Bahller Sastov				
treet Address 12 Hourtman c	+		Street Address				
ily w. Warwick	State	Zip 02.893	city, Wa	rwek	State /	Zip of 89	
List ALL directors (names an		192000	101114		box to indicate an		
rector Name	•		Director Name				
reet Address			Street Address	<del></del>	-		
ity	State	Zip	City		State	Zip	
Director Name			Director Name	Director Name			
Street Address			Street Address				
ity	State	Zip	City		State	Zip	
Shares Authorized		10. Shares Issu	<u>l</u> Jed	Check the	box to indicate ar	attachment	
This information is currently of record in the		NUMBER OF	BER OF SHARES CLASS/SERIE			PAR VALUE	
Department of State.		100	100				
hanges require an additional fil	ling.					-	
. This report must be execute					oration is in the h	ands of a re-	
iver or trustee, this report munder penalty of perjury, I de					mosovina sched	lules and	
atements, and that all state	ments contained			g any acco			
ame of Authorized Represent	ative	1 L' - n	8 2 1/2	1/	Date	30/202	
/ / -	12 ^					/ ') '\	
gnature of Authorized Represent		htier:	30,1to	<u> </u>	υ5 / :	00/202	

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

Phone: (401) 222-3040 Website: www.sos.ri.gov BY Z 9 L V C FORM 630- Revised 04/2023 A.A. 12:31 PM.