



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

JUN 01 2023

BY

23608
[Signature]

1. Entity ID Number 525676		2. Exact name of the Corporation R.M.T. CONSTRUCTION, INC.			
3. Principal Office Address 6 BUFFALO AVENUE		City WARREN		State RI	Zip 02885
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island CONSTRUCTION AND RESIDENTIAL REMODELING			
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 RICHARD TIPLADY			Vice-President Name SAME		
Street Address 6 BUFFALO AVENUE			Street Address		
City WARREN	State RI	Zip 02885	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name RICHARD TIPLADY			Director Name		
Street Address 6 BUFFALO AVENUE			Street Address		
City WARREN	State RI	Zip 02885	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES 100	CLASS/SERIES COMMON	PAR VALUE NPV
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 RICHARD TIPLADY				Date 05/22/2023	
Signature of Authorized Representative [Signature]					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov