



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.

RECEIVED
R.I. DEPT. OF STATE
JUN 14 2023

1. Entity ID Number 001713345		2. Exact name of the Corporation M&R DRYWALL CONSTRUCTION INC												
3. Principal Office Address 162 BROAD STREET			City PAWTUCKET	State RI	Zip 02860									
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island GENERAL RESIDENTIAL RENOVATION												
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 ALVARO DE LA ROCA			Vice-President Name MANUEL RODRIGUEZ											
Street Address 187 DEXTER STREET			Street Address 385 HUNT STREET APT 1											
City CUMBERLAND	State RI	Zip 02864	City CENTRAL FALLS	State RI	Zip 02863									
Secretary Name			Treasurer Name											
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			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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALU</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>CNP</td> <td>0.01</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALU	500	CNP	0.01			
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500	CNP	0.01												
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 MANUEL RODRIGUEZ				Date 04-15-2023										
Signature of Authorized Representative 				FILED JUN 14 2023 BY ML 333										