



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

AMENDED

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
JUN 14 2023

1. Entity ID Number 000124839		2. Exact name of the Corporation All States Construction, Inc.		2023 JUN 14 P 12 07	
3. Principal Office Address 112 Amherst Road			City Sunderland	State MA	Zip 01375
4. NAICS Code 237310		6. Brief description of the character of business conducted in Rhode Island Road construction and sale of bituminous products			
5. State of Incorporation MA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jean Azoury-President, Richard J. Miller-CEO			Vice-President Name Seth Hankowski-Senior Vice President		
Street Address 112 Amherst Rd.			Street Address 112 Amherst Rd.		
City Sunderland	State MA	Zip 01375	City Sunderland	State MA	Zip 01375
Secretary Name Craig S. Reed			Treasurer Name Craig S. Reed		
Street Address 112 Amherst Rd.			Street Address 112 Amherst Rd.		
City Sunderland	State MA	Zip 01375	City Sunderland	State MA	Zip 01375
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name David M. Hankowski			Director Name Mark A. Hankowski		
Street Address 112 Amherst Rd.			Street Address 112 Amherst Rd.		
City Sunderland	State MA	Zip 01375	City Sunderland	State MA	Zip 01375
Director Name Seth Hankowski			Director Name Aaron Hankowski		
Street Address 112 Amherst Rd.			Street Address 112 Amherst Rd.		
City Sunderland	State MA	Zip 01375	City Sunderland	State MA	Zip 01375
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.		NUMBER OF SHARES		CLASS/SERIES	
		38,146		V	
		114,434		NV	
		PAR VALUE		\$0.00	
				\$0.00	
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 Craig S Reed				Date 05/01/2023	
Signature of Authorized Representative 					

FILED

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

JUN 14 2023

 BY _____ 12:07