



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023  
Limited Liability Company

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 NOV 10 A 11:44

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |  |  |                    |
|---|--|--|--------------------|
| 1. Entity ID Number<br><u>001928812</u>   |  | 2. Exact name of the Limited Liability Company<br><u>D BUCCI Home Improvements LLC</u>   |                    |
| 3. NAICS Code<br><u>236118</u>  |  | 4. Brief description of the character of business conducted in Rhode Island<br><u>Contractor for home improvements<br/>kitchen/bath / floors/decks</u> |                    |
| 5. State of Formation<br><u>RI</u>  |  |  |                    |
| 6. Principal Office Address<br><u>19 Clinton St.</u>  |  | City<br><u>Johnston</u>  | State<br><u>RI</u> |
|   |  | Zip<br><u>02919</u>  |                    |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |  |                    |
| Contact Name<br><u>DAVID BUCCA</u>  |  | Contact Title<br><u>owner</u>  |                    |
| Street Address<br><u>19 Clinton St.</u>   |  | City<br><u>Johnston</u>  | State<br><u>RI</u> |
|   |  | Zip<br><u>02919</u>  |                    |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.   |  |  |                    |
| 9. 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 Person<br><u>DAVID BUCCA</u>   |  | Date<br><u>11-10-23</u>  |                    |
| Signature of Authorized Person<br><i>David Bucca</i>  |  |  |                    |

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BY ZGWMB  
AA. 11:45 AM.

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