



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

REC'D RIDDS B90
24 JAN 31 AM 8:57:41

- 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 <u>1168184</u>		2. Exact name of the Corporation <u>Nelson Landscaping Inc.</u>			
3. Principal Office Address <u>601 Salter St</u>		City <u>Providence</u>	State <u>RI</u>	Zip <u>02908</u>	
4. NAICS Code <u>812930</u>		6. Brief description of the character of business conducted in Rhode Island <u>General Landscaping Inc.</u>			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <u>Nelson Marataya</u>		Vice-President Name			
Street Address <u>601 Salter St</u>		Street Address			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02908</u>	City	State	Zip
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.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		<u>0</u>	<u>CNP</u>	<u>0</u>	
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 <u>Nelson Marataya</u>				Date <u>1/31/24</u>	
Signature of Authorized Representative <u>Nelson Marataya</u>				FILED JAN 31 2024 BY <u>G4H82</u>	

MAIL TO:
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