



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024

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

FEB 06 2024

BY 243470

1. Entity ID Number 000131228		2. Exact name of the Corporation International Paving Corporation	
3. Principal Office Address 1331 Main Street		City West Warwick	State RI
		Zip 02893	
4. NAICS Code 23 7310	6. Brief description of the character of business conducted in Rhode Island To engage in General Construction, Paving		
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 Jeffrey Joaquin		Vice-President Name Matthew Joaquin	
Street Address 36 Fiume Street		Street Address 36 Fiume Street	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
Secretary Name Darlene Joaquin		Treasurer Name Darlene Joaquin	
Street Address 36 Fiume Street		Street Address 36 Fiume Street	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
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	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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.		NUMBER OF SHARES	
Changes require an additional filing.		CLASS SERIES	
		PAR VALUE	
		1000	CNP
			\$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 Jeffrey Joaquin			Date 2-1-2024
Signature of Authorized Representative 			