RI SOS Filing Number: 202446071880 Date: 2/5/2024 4:00:00 PM

1	W.
	Annual I Corpora → Filir → Filir → Pen
ĺ	1. Entity I 10742
ł	3. Princip 227 Gf
	4. NAICS 236118
	5 State o
ı	7. List AL President I
Ĺ	Street Add
ı	City PAV
1	Secretary

State of Rhode Island			
Department of State -	Business	Services	Division

Department of Sta	ate - Busin	ess Services	Division	•	nc.	n roma.		
Annual Report for the year:	2024				REE	2024		
Corporation -	avaj				E.	2/2/1/0		
→ Filing period: February 1 - I	May 1				7	7		
→ Filing Fee: \$50.00	:((4 EL-4 L., M 04			(1 /-		
→ Penalty: Additional \$25.00 fe 1. Entity ID Number								
107428	2. Exact name of the Corporation G & R PLASTERING, INC.							
Principal Office Address			<u> </u>	<u></u>	les-ii-	15:		
227 GRAND AVENUE			City • DAIMT	HCKET	State	Zip		
	In not to			PAWTUCKET RI 02861				
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island							
236118	PLASTERING - NEW & USED							
5 State of Incorporation			1					
RHODE ISLAND								
7. List ALL officers (names and add			Iv D	Check t	he box to indic	ate an attachment 🔲		
President Name RUSSELL J. LEMIRE				Vice-President Name GERALD GRACE				
Street Address 227 GRAND AVENUE				Street Address 98 MARGARET STREET				
C:ty PAWTUCKET	State RI	^{Z_{ip}} 02861		VTUCKET	State	RI 02860		
Secretary Name GERALD GRACE			Treasurer I	Treasurer Name RUSSELL J. LEMIRE				
Street Address 98 MARGARET STREET			Street Add	Street Address 227 GRAND AVENUE				
City PAWTUCKET	State RI	^{Z₁p} 02860	City PAWTUCKET		State F	RI Z∵0 02861		
8. List ALL directors (names and ad	ldresses)			Check I	the box to indic	cate an attachment		
Director Name RUSSELL J. LEMIRE				Director Name GERALD GRACE				
Street Address 227 GRAND AVENUE			Street Add	Street Address 98 MARGARET STREET				
PAWTUCKET	State RI	^{Zip} 02861	City PAWTUCKET		State F	RI 02860		
Director Name			Director Name					
Street Address	Street Address							
City	State	Zγp	City		State	Zıp		
9. Shares Authorized	· · · · · · · · · · · · · · · · · · ·	10. Shares Issu		Check	the box to indi	cate an attachment 🔲		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES CLAS		'SERIES PAR VALUE			
		100		CNP		\$0.00		
11. This report must be executed or	n behalf of the o	corporation by an a	uthorized reg	L presentative. If the o	corporation is i	n the hands of a re-		
ceiver or trustee, this report must be	e executed on I	behalf of the corpor	ration by the	receiver or trustee.				
Under penalty of perjury, I declar statements, and that all statemen	nts contained i	nat i nave examine herein are true ani	ed this repoi d correct.	t, including any a	ccompanying	schedules and		
Name of Authorized Representative	?				Date			
RUSSELL J LEMIRE				1/28/2024				
Signature of Authorized Representa								

MAIL TO:

Division of Business Services

148 W. River Street. Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri.gov FILZD