



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 12 2024
 BY 50195
OS

1 Entity ID Number 66919		2. Exact name of the Corporation J.J. Cardosi, Inc.			
3 Principal Office Address 150 Amaral Street		City Riverside		State RI	Zip 02915
4 NAICS Code 236116		6. Brief description of the character of business conducted in Rhode Island To engage in the business of construction as a general			
5 State of Incorporation RI					
7 List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name John J. Cardosi, Jr.			Vice-President Name None		
Street Address 150 Amaral Street			Street Address		
City Riverside	State RI	Zip 02915	City	State	Zip
Secretary Name John J. Cardosi, Jr.			Treasurer Name John J. Cardosi, Jr.		
Street Address 150 Amaral Street			Street Address 150 Amaral Street		
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			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/SE-RHS	FAR VA..LF
		100		Common	No Par Value
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 John J. Cardosi, Jr., President					Date 1-25-24
Signature of Authorized Representative					

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