



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 23 2024
BY 2410253

1. Entity ID Number 000008171		2. Exact name of the Corporation P.J.R. CONSTRUCTION CO., INC	
3. Principal Office Address 448 Park Avenue		City Portsmouth	State RI
		Zip 02871	
4. NAICS Code 236118	6. Brief description of the character of business conducted in Rhode Island To engage in general construction		
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 Peter J. Raposa		Vice-President Name Peter J. Raposa	
Street Address 448 Park Ave.		Street Address 448 Park Avenue	
City Portsmouth	State RI	City Portsmouth	State RI
Zip 02871		Zip 02871	
Secretary Name Peter J. Raposa		Treasurer Name Peter J. Raposa	
Street Address 448 Park Ave.		Street Address 448 Park Ave.	
City Portsmouth	State RI	City Portsmouth	State RI
Zip 02871		Zip 02871	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name N/A		Director Name N/A	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name N/A		Director Name N/A	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized 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.		10. Shares Issued	
		NUMBER OF SHARES	CLASS/SERIES
		100	Common
			No Par
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 Peter J. Raposa			Date 2/19/24
Signature of Authorized Representative 			

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov