

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

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1 Entity ID Number 000593231		2 Exact name of the Corporation RAPOSO LANDSCAPING INC.			
3 Principal Office Address 66 REDLAND AVENUE			City RUMFORD	State RI	Zip 02916
4 NAICS Code 238900		6. Brief description of the character of business conducted in Rhode Island LANDSCAPING			
5 State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒					
President Name RAUL J RAPOSO			Vice-President Name RAUL J RAPOSO STMT 1		
Street Address 66 REDLAND AVENUE			Street Address 66 REDLAND AVENUE		
City RUMFORD	State RI	Zip 02916	City RUMFORD	State RI	Zip 02916
Secretary Name RAUL J RAPOSO			Treasurer Name RAUL J RAPOSO		
Street Address 66 REDLAND AVENUE			Street Address 66 REDLAND AVENUE		
City RUMFORD	State RI	Zip 02916	City RUMFORD	State RI	Zip 02916
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name RAUL J RAPOSO			Director Name		
Street Address 66 REDLAND AVENUE			Street Address		
City RUMFORD	State RI	Zip 02916	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 ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES 100		CLASS/SERIES COMMON
			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 <u>Raul J. Raposo</u>					Date 2-20-2024
Signature of Authorized Representative RAUL J. RAPOSO					

MAIL TO:

Division of Business Services

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