



**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 28 2024
BY [Signature] 24792

1. Entity ID Number 667243	2. Exact name of the Corporation R & D Building Concepts, Inc.
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3. Principal Office Address PO Box 174	City Bristol	State RI	Zip 02809
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4. NAICS Code 238160	6. Brief description of the character of business conducted in Rhode Island Building and construction and all other lawful purposes.
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 Jenell L. Pratas			Vice-President Name Jenell L. Pratas		
Street Address PO Box 174			Street Address PO Box 174		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Jenell L. Pratas			Treasurer Name Jenell L. Pratas		
Street Address PO Box 174			Street Address PO Box 174		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name n/a			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 This information is currently of record in the Department of State. Changes require an additional filing.	10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
	NJWBFR OF SHARES .0	CLASS/SERIES common	PAR VALU 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 Jenell L. Pratas, President	Date 2/21/24
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Signature of Authorized Representative