



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2022

## Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

REC'D RI SOS BSD  
24 FEB 28 PM 11:24:08

| 1. Entity ID Number<br>001680798                                                                                                                                                                                                                                                                                                                                                                                                                                 |              | 2. Exact name of the Corporation<br>Concrete Construction Associates, Corp.                                                                                                                                           |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------|-------------------------------------------|------------------|--------------|-----------|-----|-----|--------|--|--|--|
| 3. Principal Office Address<br>25 Tome Street                                                                                                                                                                                                                                                                                                                                                                                                                    |              | City<br>Cranston                                                                                                                                                                                                      |                  | State<br>RI | Zip<br>02920                              |                  |              |           |     |     |        |  |  |  |
| 4. NAICS Code<br>238110                                                                                                                                                                                                                                                                                                                                                                                                                                          |              | 6. Brief description of the character of business conducted in Rhode Island<br>Concrete Subcontractors                                                                                                                |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| 5. State of Incorporation<br>Rhode Island                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                       |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                   |              |                                                                                                                                                                                                                       |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| President Name<br>Edward Krasner                                                                                                                                                                                                                                                                                                                                                                                                                                 |              | Vice-President Name<br>Simon Krasner                                                                                                                                                                                  |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| Street Address<br>25 Tome Street                                                                                                                                                                                                                                                                                                                                                                                                                                 |              | Street Address<br>25 Tome Street                                                                                                                                                                                      |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| City<br>Cranston                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br>RI  | Zip<br>02920                                                                                                                                                                                                          | City<br>Cranston | State<br>RI | Zip<br>02920                              |                  |              |           |     |     |        |  |  |  |
| Secretary Name                                                                                                                                                                                                                                                                                                                                                                                                                                                   |              | Treasurer Name                                                                                                                                                                                                        |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| Street Address                                                                                                                                                                                                                                                                                                                                                                                                                                                   |              | Street Address                                                                                                                                                                                                        |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                             | State        | Zip                                                                                                                                                                                                                   | City             | State       | Zip                                       |                  |              |           |     |     |        |  |  |  |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                       |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| Director Name<br>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<br>This information is currently of record in the Department of State.<br>Changes require an additional filing.                                                                                                                                                                                                                                                                                                                             |              | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                 |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |              | <table border="1"><thead><tr><th>NUMBER OF SHARES</th><th>CLASS/SERIES</th><th>PAR VALUE</th></tr></thead><tbody><tr><td>100</td><td>STK</td><td>\$0.01</td></tr><tr><td></td><td></td><td></td></tr></tbody></table> |                  |             |                                           | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | 100 | STK | \$0.01 |  |  |  |
| NUMBER OF SHARES                                                                                                                                                                                                                                                                                                                                                                                                                                                 | CLASS/SERIES | PAR VALUE                                                                                                                                                                                                             |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| 100                                                                                                                                                                                                                                                                                                                                                                                                                                                              | STK          | \$0.01                                                                                                                                                                                                                |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                       |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| 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.<br><b>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.</b> |              |                                                                                                                                                                                                                       |                  |             |                                           |                  |              |           |     |     |        |  |  |  |
| Name of Authorized Representative<br>Edward Krasner                                                                                                                                                                                                                                                                                                                                                                                                              |              |                                                                                                                                                                                                                       |                  |             | Date<br>2-26-2024                         |                  |              |           |     |     |        |  |  |  |
| Signature of Authorized Representative<br>                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                       |                  |             | FILED 11:25<br>FEB 28 2024<br>H7T8d<br>KS |                  |              |           |     |     |        |  |  |  |