

FILED



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

MAR 12 2024
 BY *[Signature]*
[Signature]

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 73684		2. Exact name of the Corporation P. & G. Engineering Company, Inc.			
3. Principal Office Address 7 Arborwood Drive			City Burlington	State MA	Zip 01803
4. NAICS Code 23 - Construction		6. Brief description of the character of business conducted in Rhode Island Engineering Services			
5. State of Incorporation MASSACHUSETTS					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Myles P. Flaherty			Vice-President Name Gregory Flaherty		
Street Address 7 Arborwood Drive			Street Address 7 Arborwood Drive		
City Burlington	State MA	Zip 01803	City Burlington	State MA	Zip 01803
Secretary Name Peter Flaherty			Treasurer Name Myles P. Flaherty		
Street Address 7 Arborwood Drive			Street Address 7 Arborwood Drive		
City Burlington	State MA	Zip 01803	City Burlington	State MA	Zip 01803
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Peter Flaherty			Director Name None		
Street Address 7 Arborwood Drive			Street Address		
City Burlington	State MA	Zip 01803	City	State	Zip
Director Name Gregory Flaherty			Director Name None		
Street Address 7 Arborwood Drive			Street Address		
City Burlington	State MA	Zip 01803	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/SERIES
			100		Common
					PAR VALUE
					None
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 Myles P. Flaherty, President				Date 2/21/24	
Signature of Authorized Representative <i>[Signature]</i>					
SIGN DOCUMENT HERE					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov