



State of Rhode Island
Department of State - Business Services Division

FILED

MAR 13 2024

BY 11921
DS

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.

1. Entity ID Number 75532	2. Exact name of the Corporation R.J. Russo Excavating, Inc.
-------------------------------------	--

3. Principal Office Address 121 Woodville Alton Rd.	City Hope Valley	State RI	Zip 02832
---	----------------------------	--------------------	---------------------

4. NAICS Code 23 1110	6. Brief description of the character of business conducted in Rhode Island Excavation
5. State of Incorporation RI	

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Robert J. Russo			Vice-President Name Cindy L. Russo		
Street Address 121 Woodville Alton Rd.			Street Address 121 Woodville Alton Rd.		
City Hope Valley	State RI	Zip 02832	City Hope Valley	State RI	Zip 02832
Secretary Name Robert J. Russo			Treasurer Name Cindy L. Russo		
Street Address 121 Woodville Alton Rd.			Street Address 121 Woodville Alton Rd.		
City Hope Valley	State RI	Zip 02832	City Hope Valley	State RI	Zip 02832

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			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	10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASSIFIES
Changes require an additional filing.	200	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 Robert J. Russo	Date 03/08/2024
---	---------------------------

Signature of Authorized Representative