



State of Rhode Island
Department of State - Business Services Division

FILED

MAR 25 2024

BY Bloom

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 000033097		2. Exact name of the Corporation PAWTUCKET FENCE & IRON WORKS, INC.			
3. Principal Office Address 2 LEDGE ROAD			City LINCOLN	State RI	Zip 02865
4. NAICS Code 238330		6. Brief description of the character of business conducted in Rhode Island FENCE CONSTRUCTION AND REPAIRS			
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 WALTER R. LENARTOWICZ, JR.			Vice-President Name		
Street Address 2 LEDGE ROAD			Street Address		
City LINCOLN	State RI	Zip 02865	City	State	Zip
Secretary Name WALTER R. LENARTOWICZ, JR.			Treasurer Name WALTER R. LENARTOWICZ, JR.		
Street Address SEE ABOVE			Street Address SEE ABOVE		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name WALTER. R. LENARTOWICZ, JR.			Director Name		
Street Address SEE ABOVE			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 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.		10. Shares Issued		CLASS/SERIES	
		NUMBER OF SHARES		PAR VALUE	
		140	SOMMON	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 WALTER R. LENARTOWICZ, JR.				Date JANUARY 22, 2024	
Signature of Authorized Representative <i>Walter Lenartowicz JR</i>					

MAIL TO:
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