State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Corporation	2024			APR 1 1 202	¹⁴ 7	
→ Filing period: February 1 - → Filing Fee: \$50.00 → Penalty: Additional \$25.00	fee if form is no			2011		
Entity ID Number	Exact name	of the Corporation	1	<u> </u>		
37708	R&MB	<u>UILDERS, II</u>	NC.			
Principal Office Address			City	State	Zip	
13 Penny Lane			Cranston	RI	02921	
4. NAICS Code	6. Brief descrip	otion of the charact	ter of business conducted	d in Rhode Island		
236116	general contractor home building					
5. State of Incorporation	1 ~	-	7			
Rhode Island	l					
7. List ALL officers (names and ad President Name			(Check the box to indicate an	attachment 🔲	
Robert E. Moll			Vice-President Name			
Street Address 13 Penny Lane			Street Address	Street Address		
^{City} Cranston	State RI	^{Z_{ip}} 02921	City	State	Zıp	
Robert E. Moll			Treasurer Name Robert E. Moll			
Street Address 13 Penny Lane			Street Address 13 Penny Lane			
^{City} Cranston	State RI	^{Zıp} 02921	City Cranston	State RI	^{Zip} 02921	
List ALL directors (names and ac Director Name	ddresses)		Director Name	Check the box to indicate an	attachment 🔲	
			Director Marne			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name	-		Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Ζιρ	
9. Shares Authorized This information is currently of recor	- 4 1 - 4	10. Shares Issu		Check the box to indicate an		
This information is currently of record	id in the	NUMBER OF	SHARES	CLASS/SERIES	PAR VALUE	
Changes require an additional filing.		 				
11. This report must be executed or	n behalf of the α	orporation by an au	uthorized representative.	If the corporation is in the ha	inds of a re-	
ceiver or trustee, this report must b Under penalty of perjury, I declar	e executed on bi	enall of the corpora	ation by the receiver or to	nistea		
<u>statements,</u> and that all statemel	nts contained hi	erein are true and	correct.	any accompanying schedo	nes and	
Name of Authorized Representative Robert E. Moll	;			Date	5.2024	
Signature of Authorized Represent:	ative			- <u> </u>	/	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov