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State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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1. Entity ID Number	2. Exact name of the Limited Liability Company General Construction and Remodeling, LLC					
3. NAICS Code 236118	4. Brief description of the character of business conducted in Rhode Island General Contructor and home remodeler.					
5. State of Formation						
6. Principal Office Address	<u> </u>	City	State	Zip		
33 Providence Ave		Riverside	RI	02915		
7. Mailing Address of Limited L	iability Company and Name or T	itle of Contact Person				
Contact Name Nicholas Andreozzi		Contact Title Chief of Operation				
Street Address 40 Planet Ave		City	State RI	^{Zip} 02915		
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
	declare and affirm that I have aments contained herein are tr		iding any accompany	ing schedules and		
Name of Authorized Person			Date	Date		
Nicholas Andreozzi			04/29/2024			
Signature of Authorized Perso			•			

MAY X 1 2024

MAIL TO:

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

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