



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
FEB 18 2025
BY 005878 EG

1. Entity ID Number 89358		2. Exact name of the Corporation A. DIFAZIO CONSTRUCTION, INC.			
3. Principal Office Address 132 Shun Pike			City Johnston	State RI	Zip 02919
4. NAICS Code 238910		6. Brief description of the character of business conducted in Rhode Island Construction, excavating and trucking			
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 Anthony A. DiFazio			Vice-President Name Anthony A. DiFazio		
Street Address 132 Shun Pike			Street Address 132 Shun Pike		
City Johnston	State RI	Zip 02919	City Johnston	State RI	Zip 02919
Secretary Name			Treasurer Name		
Street Address			Street Address		
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 Anthony J. DiFazio			Director Name		
Street Address 132 Shun Pike			Street Address		
City Johnston	State RI	Zip 02919	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. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		None			
		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 Anthony A. DiFazio					Date 2-10-25
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
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