



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.

REC'D RI SOS BS
 25 APR 29 PM 12:41:21

1. Entity ID Number 505136		2. Exact name of the Corporation Commerce Construction, Inc.												
3. Principal Office Address 361 Atwells Ave Unit 4			City Providence	State RI	Zip 02903									
4. NAICS Code 53110		6. Brief description of the character of business conducted in Rhode Island To Purchase, develop, improve and sell real estate												
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 Salvatore Eacuello, Jr			Vice-President Name											
Street Address 361 Atwells Ave Unit 4			Street Address											
City Providence	State RI	Zip 02903	City	State	Zip									
Secretary Name Salvatore Eacuello, Jr.			Treasurer Name											
Street Address 361 Atwells Ave Unit 4			Street Address											
City Providence	State RI	Zip 02903	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Salvatore Eacuello, Jr.			Director Name											
Street Address 361 Atwells Ave Unit 4			Street Address											
City Providence	State RI	Zip 02903	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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>Common Stock</td> <td>\$.01</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200	Common Stock	\$.01			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
		200	Common Stock	\$.01										
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. <i>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.</i>														
Name of Authorized Representative Salvatore Eacuello, Jr.					Date 04-29-2025									
Signature of Authorized Representative <i>Salvatore Eacuello</i>					FILED APR 29 2025 BY 1027 AA.									

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov