



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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2025 MAY 30 P 3: 10

1. Entity ID Number 375116		2. Exact name of the Corporation MELUCCI CONSTRUCTION, INC.			
3. Principal Office Address 385 Rockland Road		City North Scituate		State RI	Zip 02857
4. NAICS Code 236115		6. Brief description of the character of business conducted in Rhode Island residential and commercial construction services			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Michael Melucci			Vice-President Name None		
Street Address 385 Rockland Road			Street Address		
City North Scituate	State RI	Zip 02857	City	State	Zip
Secretary Name Michael Melucci			Treasurer Name Michael Melucci		
Street Address 385 Rockland Road			Street Address 385 Rockland Road		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Michael Melucci			Director Name		
Street Address 285 Rockland Road			Street Address		
City North Scituate	State RI	Zip 02857	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 ☐					
This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued		CLASS/SERIES	
		NUMBER OF SHARES	100	common	PAR VALUE 0.01
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. 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 Michael Melucci				Date 5/1/25	
Signature of Authorized Representative 					

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

FILED
MAY 30 2025
BY 0519
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