




State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
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 RIDOS BSD
25 AUG 12 AM 11:52:57

1. Entity ID Number 001716031		2. Exact name of the Corporation CACICIA & SONS ELECTRICAL INC			
3. Principal Office Address 80 HUNTER AVENUE		City JOHNSTON		State RI	Zip 02919
4. NAICS Code 238210		6. Brief description of the character of business conducted in Rhode Island ELECTRICAL INSTALL + SERVING			
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 STEVEN CACICIA			Vice-President Name		
Street Address 80 Hunter Ave			Street Address		
City Johnston	State RI	Zip 02919	City	State	Zip
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 STEVEN CACICIA			Director Name		
Street Address 80 Hunter Ave			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	PAR VALUE
		300		COMMON	NO PAR
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 STEVEN CACICIA				Date 8/12/25	
Signature of Authorized Representative 					

FILED

MAIL TO:

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

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BY 34042 FORM 630- Revised: 12/2023