RI SOS Filing Number: 202578309440 Date: 9/19/2025 4:00:00 PM State of Rhode Island **Department of State - Business Services Division** Annual Report for the year: Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. 1. Entity ID Number 2. Exact name of the Corporation 910266 ransportation of Smithfield 3. Principal Office Address 112879 Spartina Wakefield 6. Brief description of the character of business conducted in Rhode Island aggregate materials and transport 5. State of Incorporation Construction equipment 7. List ALL officers (names and addresses) Check the box to indicate an attachment President Name Vice-President Name artha andru Catrison Flizabeth Street Address Street Address cove way 0 | | | | | | | | RI Secretary Name Street Address Street Address Zip City State State Zю Check the box to indicate an attachment 8. List ALL directors (names and addresses) Director Name Director Name Street Address Street Address State Zip City State Zip City Director Name Director Name Street Address Street Address City Ζıρ State Check the box to indicate an attachment 10. Shares Issued 9. Shares Authorized NUMBER OF SHARES CLASS/SERIES This information is currently of record in the CNP Department of State. Changes require an additional filing. 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. Date Name of Authorized Representative

MAIL TO:

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