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State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: **2022**  
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <b>000312310</b>		2. Exact name of the Corporation <b>MADURO MASONRY CONTRACTOR, INC.</b>			
3. Principal Office Address <b>8 Christopher Drive</b>			City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>
4. NAICS Code <b>238140</b>		6. Brief description of the character of business conducted in Rhode Island <b>Masonry work</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Francisco T. Maduro</b>			Vice-President Name <b>Natalia M. Maduro</b>		
Street Address <b>8 Christopher Drive</b>			Street Address <b>8 Christopher Drive</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>
Secretary Name <b>Natalia M. Maduro</b>			Treasurer Name <b>Francisco T. Maduro</b>		
Street Address <b>8 Christopher Drive</b>			Street Address <b>8 Christopher Drive</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Francisco T. Maduro</b>			Director Name <b>Natalia M. Maduro</b>		
Street Address <b>8 Christopher Drive</b>			Street Address <b>8 Christopher Drive</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>
Director Name <b>None</b>			Director Name <b>None</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.		10. Shares Issued		Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		<b>200</b>	<b>Common</b>	<b>No Par Value</b>	
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 <b>Francisco T. Maduro</b>				Date	
				<b>FILED</b>	
Signature of Authorized Representative <i>Francisco T. Maduro</i>					
SIGN DOCUMENT HERE <b>MAR 21 2022</b>					

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

BY *[Signature]* E 8555  
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