

**FILED**

MAY 05 2022

BY

*1739 OS*

A. Ralph Molts, Secretary of State  
 Corporations Division  
 148 W. River Street  
 Providence, RI 02904-2615  
 401.222.3040



State of Rhode Island  
 and Providence Plantations  
 Office of the Secretary of State

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2022**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 160471		2. Name of Corporation TONY APICE BUILDERS, INC.			
3. Street Address Principal Business Office 15 OLD MILL ROAD			City CHARLESTOWN	State RI	Zip 02813
4. Business Phone No. 401-364-5090		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island Carpentry Work					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ANTHONY APICE JR.			Vice President Name ANTHONY APICE JR.		
Street Address 15 OLD MILL ROAD			Street Address 15 OLD MILL ROAD		
City CHARLESTOWN	State RI	Zip 02813	City CHARLESTOWN	State RI	Zip 02813
Secretary Name KATIE J. APICE			Treasurer Name ANTHONY APICE JR.		
Street Address 15 OLD MILL ROAD			Street Address 15 OLD MILL ROAD		
City CHARLESTOWN	State RI	Zip 02813	City CHARLESTOWN	State RI	Zip 02813
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ANTHONY APICE JR.			Director Name KATIE J. APICE		
Street Address 15 OLD MILL ROAD			Street Address 15 OLD MILL ROAD		
City CHARLESTOWN	State RI	Zip 02813	City CHARLESTOWN	State RI	Zip 02813
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 400	Class/Series COMMON	Par Value NO PAR VALUE

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.

*Anthony Apice Jr.*  
 Signature \_\_\_\_\_ Date 4.26.22  
 ANTHONY APICE JR.  
 Print or Type Name  
 PRESIDENT  
 Title

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY