	State of Rhode	Island	No Fee
	Office of the Secreta	ary of State	
	Division Of Business		
	148 W. River S		
7636	Providence RI 029 (401) 222-30		
Limited Partnership Annual Report - Amended Filing Period: February 1 - May 1			
In accordance with R.I.G.L. 7-13.1-212(e), each partnership failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-13-212(c&d)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: <u>2024</u>			
1. ID No. <u>001701521</u>			
2. Exact Name of the Partnership <u>S & B Engineers and Constructors, Ltd.</u>			
3. State of Formation			
State: <u>TX</u>			
NAICS CODE			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>237990</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
FRONT END ENGINEERING AND DETAILED DESIGN SERVICES			
5. Principal Office Address			
No. and Street: <u>15150 MEMORIAL DRIVE</u>			
City or Town: HOU	<u>USTON</u> Sta	ate: <u>TX</u> Zip: <u>77079</u> Country: <u>U</u>	<u>SA</u>
6. The name and business address of each general partner is: An amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (Foreign)			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Coun	try
PARTNER	S&B ENGINEERS AND CONSTRUCTORS MANAGEMENT, LTD.	15150 MEMORIAL DRIVE HOUSTON, TX 77079 USA	

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7. This report must be executed by a General Partner or by an Authorized Representative pursuant to R.I.G.L. 7-13.1.

Signed this 7 Day of February, 2024 at 2:05:29 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the partnership, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-13.1*

By <u>SYLVIA J. ANDERSON</u> Signature of Authorized Person

Form No. 643 Revised 10/23

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

February 07, 2024 02:04 PM

Treng M. Course

Gregg M. Amore Secretary of State

