



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

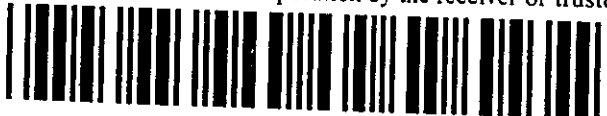
Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

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&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 116904		2. Name of Corporation Napolitano Building, Corp.			
3. Street Address Principal Business Office c/o Gregory Fater, 55 Memorial Blvd			City Newport	State RI	Zip 02840
4. Business Phone No. 401-848-7777		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO OPERATE A BUSINESS FOR CONTRACTING BUSINESS OR FOR ANY OTHER REASON A CORPORATION MAY EXIST UNDER THE LAWS OF RHODE ISLAND					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Sean P. Napolitano			Vice President Name Sean P. Napolitano		
Street Address 51 Callendar Ave			Street Address 51 Callendar Ave		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
Secretary Name Sean P. Napolitano			Treasurer Name Sean P. Napolitano		
Street Address 51 Callendar Ave			Street Address 51 Callendar Ave		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/A			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
2,000	\$1.00	PAR VALUE	ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	common	\$1.00
			THIS SECTION MUST BE COMPLETED		

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.

Signature *Sean P. Napolitano* Date 9/11/07
Print or Type Name SEAN P. NAPOLITANO
Title President

File Date **FILED** *116904
Check No. **SEP 12 2007**
By: 8484
FOR SECRETARY OF STATE USE ONLY