



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. 135367		2. Name of Corporation DBS Equipment Inc			
3. Street Address Principal Business Office 84 crest Road		City NO. Smithfield	State RI	Zip 02896	
4. Business Phone No. 401-766-6398		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Snow Removal.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name NANCY C Stevenin		Vice President Name			
Street Address 84 crest Rd		Street Address			
City NO. Smithfield	State RI	Zip 02896			
Secretary Name Albert J Stevenin JR		Treasurer Name			
Street Address 84 crest Rd		Street Address			
City NO. Smithfield	State RI	Zip 02896			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Albert J Stevenin JR		Director Name			
Street Address 84 crest Road		Street Address			
City NO. Smithfield	State RI	Zip 02896			
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip			
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐			
AUTHORIZED SHARES		ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	1	0	100	1	0

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.

FILED

NOV 19 2007

File Date By AMF

Check No. 205

By: 11-42542

FOR SECRETARY OF STATE USE ONLY

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 Date NOV 19 07

Albert J Stevenin JR

Secretary