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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 2008

THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

Filing Period: January 1 - March 1 • Filing Fee: $50.00* **** 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.	2. Name of Corporation			
97970	Nicholas Electric & Controls, Inc.			
3. Street Address Principal Business Office		City	State	Zip
28 CALUMENT AVENUE		JOHNSTON	RI	02919
4. Business Phone No.	5. State of Incorporation			
401 331 4813	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island

TO ENGAGE IN THE BUSINESS OF ELECTRICAL CONTRACTING.

7. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
KEVIN POITRAS	28 CALUMENT AVENUE	JOHNSTON	RI	02919

Vice President Name	Street Address	City	State	Zip
KEVIN POITRAS	28 CALUMENT AVENUE	JOHNSTON	RI	02919

Secretary Name	Street Address	City	State	Zip
KEVIN POITRAS	28 CALUMENT AVENUE	JOHNSTON	RI	02919

Treasurer Name	Street Address	City	State	Zip
KEVIN POITRAS	28 CALUMENT AVENUE	JOHNSTON	RI	02919

8. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES		
Number of Shares	*Class/Series*	*Par Value*
600 NO PAR VALUE		

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	*Class/Series*	*Par Value*
100	COMMON	NO PAR
THIS SECTION		

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.

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this repo including any accompanying schedules and statements, and that all statemer contained herein are true and correct.

Signature — *Date* 1-4-08

KEVIN POITRAS
Print or Type Name

PRESIDENT
Title

[redacted]

97970
FILED
File Date
JAN 09 2008
Check No.
By 4603
By: 17644-1-214050
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 08/06