



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

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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. 7571		2. Name of Corporation M. DiSandro & Sons Masonry, Inc.		
3. Street Address Principal Business Office 106 Lonsdale Farm Road			City Cumberland	State RI
4. Business Phone No. 401-334-0909		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Masonry				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Robert DiSandro			Vice President Name None	
Street Address 106 Lonsdale Farm Road			Street Address	
City Cumberland	State RI	Zip 02864	City	State RI
Secretary Name Robert DiSandro			Treasurer Name Robert DiSandro	
Street Address 106 Lonsdale Farm Road			Street Address 106 Lonsdale Farm Road	
City Cumberland	State RI	Zip 02864	City Cumberland	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS.				
Director Name None			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
200 Common No Par Value			81	Common
				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.

File Date	FILED
Check No.	JAN 18 2008
By:	By 14488
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: *Robert DiSandro* Date: 1/14/08
 Print or Type Name: Robert DiSandro
 Title: President