

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(cSd)) is subject to a penalty fee of \$25.00.

| mw (R.I.G.L. /-1.2-1)01(tGu)) is | subject to a pentity je | c og 425.00. | | | | | | | | | | | |
|--------------------------------------------------------------|-------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------|--|--|--|--|--|--|--|--|
| 1. Corporate ID No. 13326 | 2. Name of Corporation GULOTTA ASSO | OCIATES, INC. | | | | | | | | | | | |
| 3. Street Address Principal Business C 73 CROTHERS AVENU | ffice E | | CRANSTON | <i>хір</i> 02910 | | | | | | | | | |
| 4. Business Phone No. 401-943-4950 | | 5. State of Incorporation RHODE ISLAND |) | | | | | | | | | | |
| 6. Brief Description of the Character of LANDSCAPE ARCHITECT | URE | | | | | | | | | | | | |
| 7. NAMES AND ADDRESSES | OF THE OFFICERS: | ("X" BOX FOR ATTAC | HMENT) 🔲 FILL IN SPACE | ES BEFORE USING ATT | ACHMENTS | | | | | | | | |
| President Name | | | Vice President Name | | | | | | | | | | |
| LOUIS P. GULOTTA | | | LOUIS P. GULOTTA | | | | | | | | | | |
| Street Address 73 CROTHERS AVENUE | I | | Street Address 73 CROTHERS AVENUE | | | | | | | | | | |
| Сиу | State | Zip | City | State | Zip | | | | | | | | |
| CRANSTON |]RI | 02910 | CRANSTON | RI | 02910 | | | | | | | | |
| Secretary Name LOUIS P. GULOTTA | | | Treasurer Name LOUIS P. GULOTTA | | | | | | | | | | |
| Street Address | _ | | Street Address | | | | | | | | | | |
| 73 CROTHERS AVENUE | = | | 73 CROTHERS AVENUE | | | | | | | | | | |
| City CRANSTON | State RI | ^{Zip} 02910 | City CRANSTON | State RI | ^{2ற} 02910 | | | | | | | | |
| 8. NAMES AND ADDRESSES | OF THE DIRECTORS | ("X" BOX FOR ATT | <i>асниент</i>) 🗌 fill in spa | CES BEFORE USING AT | TACHMENTS | | | | | | | | |
| Director Name | | | Director Name | | | | | | | | | | |
| Street Address | | | Street Address | | | | | | | | | | |
| Сиу | State | Zip | City | State | Zip | | | | | | | | |
| Director Name | J | J | Director Name | | | | | | | | | | |
| Street Address | | | Street Address | | | | | | | | | | |
| Сиу | State | Zip | City | State | Zψ | | | | | | | | |
| 9. SHARES AUTHORIZED (AUTHORIZED SHARES | "X" BOX FOR ATTAC | TAMENO | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) [ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | | | | | | | | | |
| Number of Shares | Class/Series | Par value | Number of Shares | Class/Series | Par Value | | | | | | | | |
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| This report must be executed | on behalf of the corn | oration by an authorize | d representative. If the corpor | ration is in the hands of | a receiver or trustee | | | | | | | | |

this report must be executed on behalf of the corporation by the receiver or trustee.

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| Under penalty of perjury, I declare and a | | |
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| including any accompanying schedules a contained herein are true and ovect. | and statements, and that al | 1 statements |
| Annin II Millett. | 1-28. | · 048 |
| Signature | Date | |
| LOUIS P. GULOTTA | | |
| Print or Type Name | | |
| PRESIDENT | | |
| Tiel | <u> </u> | |

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