

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 benalty fee of \$25.00.

1. Corporate ID No. 9446	2. Name of Corpo	2. Name of Corporation DOIRE ENTERPRISES, INC.						
3. Street Address Principal Business		- ENTERPRISES,						
3. Street Address Principal Business Office 470 Colvin Street			City	State	Zip			
4. Business Phone No.	1000	5. State of Incorporation	South Attleb	oro MA	02703			
508-761-7588	St State of Precorporation							
6. Brief Description of the Character	of Business Conduct	ed in Rhode Island	. a i i u					
Hardware and								
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7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATT President Name			· Vice President Name					
James H. Maziarz			James H. Maziarz					
Street Address			Street Address					
33 Monticello Road #11			33 Monticello Road #11					
City	State	Zip	City	State				
Pawtucket	RI	02861	. ~		Zip			
Secretary Name		I0.40.0.1	Pawtucket Treasurer Name	RI	02861			
James H. Maziarz								
Street Address	arz		James H. Maziarz Street Address					
33 Monticello	Dood #11		•					
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Pawtucket		1 *		State	Zip			
8. NAMES AND ADDRESSES	RI	02861	Pawtucket	J RI	l 02861			
Director Name		ACKED A BOAROK	Director Name	SPACES BEFORE USING	5 ATTACHMENTS			
			Bueclor Hame					
James H. Mazia Street Address	ar7		Street Address		<u> </u>			
33 Monticello	Road #11		Street Address					
City	State	Zip	City	State	7/2			
Pawtucket	RI	02861	chy	state	Zip			
Director Name			Director Name					
None								
Street Address			None Street Address					
Sireer Muuress			Street Address					
City	State	Zip	City	State	2/5			
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This report must be executed	on behalf of the	corporation by an author	ized representative. If the co	ornoration 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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including a	ny accompanyi	ng sched	lules and s		examined this report, and that all statements
<u> </u>	erein are true a	ndcorre	ha	Am	1-22-08
Signature James) H. Maz	ziar	z	Date	
Print or Type Presi					
Title					

Form 630 Rev. 12/06