



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

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. 9728		2. Name of Corporation DOOR ENGINEERING INC			
3. Street Address Principal Business Office ONE OVERHEAD WAY		City WARWICK	State RI		
4. Business Phone No. 401-467-3041		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island REAL ESTATE HOLDING CORP					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JAMES R. GRACE		Vice President Name JAMES R. GRACE			
Street Address 5 SO. CLIFF DR		Street Address SAME			
City NARR.	State RI	City 02882	Zip		
Secretary Name SAME		Treasurer Name SAME			
Street Address		Street Address			
City	State	City	State		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name		Director Name			
Street Address		Street Address			
City	State	City	State		
Director Name		Director Name			
Street Address		Street Address			
City	State	City	State		
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
200	COMM	NO PAR VALUE	100	COMM	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	
File Date	FEB 20 2008
Check No.	DS-1021
By	
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: James R. Grace Date: 2/20/08
Print or Type Name: JAMES R. GRACE
Title: PRES.