



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. 129915		2. Name of Corporation Storch Radon Services, Inc.			
3. Street Address Principal Business Office 1628-R GAR Highway			City Somerset	State MA	Zip 02726
4. Business Phone No. 508 675-8511		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Rendering radon gas inspections in dwellings, including but not limited to, radon detection, analysis					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Frederick J. Storch, Jr.			Vice President Name		
Street Address 50 Fuller Street			Street Address		
City Middleboro	State MA	Zip 02346	City	State	Zip
Secretary Name Jodi Beth Storch			Treasurer Name Frederick J. Storch, Jr.		
Street Address 50 Fuller Street			Street Address 50 Fuller Street		
City Middleboro	State MA	Zip 02346	City Middleboro	State MA	Zip 02346
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Frederick J. Storch, Jr.			Director Name Jodi Beth Storch		
Street Address 50 Fuller Street			Street Address 50 Fuller Street		
City Middleboro	State MA	Zip 02346	City Middleboro	State MA	Zip 02346
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200,000	common no par value		1,000	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.

**FILED**

File Date FEB 27 2008

Check No. 5761

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.

Jodi Beth Storch 2/25/08  
Signature Date  
Jodi Beth Storch  
Print or Type Name  
Secretary  
Title