

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*

* 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.

law (R.I.G.L. 7-1.2-1501(c&d) 1. Corporate ID No.	2. Name of Con				1 101 1
109944		URS, INC.			
3. Street Address Principal Business Office 31 GLENDALE ROAD			City NARRAGANSETT	State Ri	^{Zip} 02882
4. Business Phone No. 5. State of Incorporal RHODE ISLA				•	
6. Brief Description of the Charac TO TRANSACT A TOUR	•				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR A President Name DONALD MARCOCCIO			TTACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name DONALD MARCOCCIO		
Street Address 31 GLENDALE ROAD			Street Address 31 GLENDALE ROAD		
Cuy NARRAGANSETT	State RI	^{Zip} 02882	City NARRAGANSETT	State RI	^{Zip} 02882
Secretary Name DONALD MARCOCCIO			Treasurer Name DONALD MARCOCCIO		
Street Address 31 GLENDALE ROAD			Street Address 31 GLENDALE ROAD		
City NARRAGANSETT	State RI	^{Zip} 02882	City NARRAGANSETT	State RI	^{Zip} 02882
8. NAMES AND ADDRESS Director Name DONALD MARCOCCI		ECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SE	PACES BEFORE USING	G ATTACHMENTS
Street Address 31 GLENDALE ROAD			Street Address		
City NARRAGANSETT	State RI	Zip 02882	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip Zip Zip
9. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR	ATTACHMENT)	10. SHARES ISSUED ("2	X" BOX FOR ATTACE	AND BEING
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value 11
4,000 NO PAR VALUE			100 SHARES	COMMON	₩ NOTER VALUE
					3
This report must be execute this report must be executed.			orized representative. If the corp	oration is in the hands	s of a receiver or trustee,

	FILED				
File Date _	FEB 2 8 2008				
Check No By:	By () 5				
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 sta	atements, and that all statements
contained herein are true and forect.	
V halelle	2-7-08
 Signature	Date
DONALD MARCOCCIO	
Print or Type Name	
PRESIDENT	
 Title	