



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. 88582		2. Name of Corporation Site Engineering Consultants, Inc.			
3. Street Address Principal Business Office 55 Grape Shot Road			City Sharon	State MA	Zip 02067
4. Business Phone No. 781-784-0326		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island To provide civil engineering consulting and design services for site development related projects.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony Stella			Vice President Name Leah Stella		
Street Address 55 Grape Shot Road			Street Address 55 Grape Shot Road		
City Sharon	State MA	Zip 02067	City Sharon	State MA	Zip 02067
Secretary Name Leah Stella			Treasurer Name Anthony Stella		
Street Address 55 Grape Shot Road			Street Address 55 Grape Shot Road		
City Sharon	State MA	Zip 02067	City Sharon	State MA	Zip 02067
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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
15,000 NO PAR VALUE			15,000	Common	
			THIS SECTION MUST BE COMPLETED		

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.

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.

Anthony Stella 2/18/08
Signature Date

Anthony Stella
Print or Type Name

President
Title

FILED	
File Date	FEB 29 2008
Check No.	8944
By:	
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