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 2009

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. 144592	2. Name of Corporation: American Builders Of RI, Inc.		
3. Street Address Principal Business Office: 400 Old Plainfield Pike	City: Foster	State: RI	Zip: 02825
4. Business Phone No.: 401-647-3266	5. State of Incorporation: RI		

6. Brief Description of the Character of Business Conducted in Rhode Island: Carpentry

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Robert A. Bourgault	
Street Address: 400 Old Plainfield Pike	Street Address: N/A
City: Foster / State: RI / Zip: 02825	City: N/A / State: / Zip:
Secretary Name	Treasurer Name
Street Address: N/A	Street Address
City: N/A / State: / Zip:	City / State / Zip

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: N/A / State: / Zip:	City: N/A / State: / Zip:
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

9. SHARES AUTHORIZED	10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐		
	ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.	*Number of Shares*: 0	*Class/Series*	*Par Value*
	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.

[redacted] [redacted]

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.

Robert A. Bourgault — *Signature* — 12/26/08 — *Date*

Robert A. Bourgault — *Print or Type Name*

[redacted] President — *Title*

File Date	1-12-09
Check No.	1410
By:	MMC

FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 08/08