

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.

Filling Period: Sandary   - Ividicit   - Filling	( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
* In accordance with R.I.G.L. 7-1.2-1501(e), euch corporation failing or refusing to file	e its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cod)) is
subject to a penalty fee of \$25.00.	

. Corporate ID No. 4364	2. Name of Corporation Coastal Electric	2. Name of Corporation Coastal Electric, Inc.					
2 Person & Johnson Description Offices		City Newport	State ri	<i>Ζψ</i> <b>02840</b>			
4. Business Phone No. 5. State of Incorporation (401) 849-5656 Rhode Island							
Electrical Contracting  NAMES AND ADDRES	ucter of Business Conducted in . 55ES OF THE OFFICERS		CHMENT)   FILL IN S	SPACES BEFORE USING A	TTACHMENTS		
President Name Costa Gianetis Street Address 184 Indian Avenue		Peter D. Reed Street Address 39 Peaceful Way					
					ortsmouth	State Rhode Island	<sup>Zip</sup> 02871
Secretary Name Costa Glanetis		Tressurer Name Peter D. Reed					
Street Address SAME		Street Address SAME					
Thy .	State	Zψ	City	State	Zψ		
. NAMES AND ADDRE	SSES OF THE DIRECTO	S ("X" BOX FOR AT	ACHMENT) THILL IN Director Name Peter D. Reed	n spaces before using	ATTACHMENTS		
Street Address		Street Address SAME					
SAM SAM	E State	Zψ	Gray	State	Zψ		
Oirector Name		.,,	Director Name				
Street Address		Street Address					
Йţy	State	Zip	Gly	State	Zip		
). Shares authoriz	ED			("X" BOX FOR ATTACH ECTION MUST BE COMPLETED	MENT)		
The secretary of			Number of Shares	Glass/Series	Par Yalue		
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.		180	Common	No Par			
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This report must be executive report must be executive the control of the control	cuted on behalf of the co cuted on behalf of the cor	rporation by an authorize poration by the receiver	or trustee.	corporation is in the hands	OT BIODOLLAS AS MANAGE		
		<del></del>	including any acc	perjury, I declare and affirm to companying schedules and sta	hat I have examined this r tements, and that all state		
FILE!	<b>)</b>		contained herein	are true and correct.  The least	1/10/09		
Check No. JAN 132			Signature		Date		
~ //	17	• .	Peter D. F				
by: By 269		.	Treasurer	·			
	and the state of t		1100000101				