

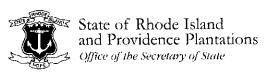
A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

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. 7-1.2-150	N(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.	
4 27 1 10 17	2. Manuary & Courts, markeyer

. Corporale ID No. 3302	2. Name of Corp CPI CONT	Poration ROLS INC.			
3. Street Address Principal Business Office 29 MENDON AVENUE			PAWTUCKET	State RI	^{Zip} 02861
4. Husiness Phone No. 5. State of Incorporation (401) 722-5900 RI					
. Brief Description of the Characte INDUSTRIAL DISTRIBUT	OR OF PIPE AI	ND VALVE SYSTEMS			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name JOHN RUGGIERI			CHMENT) I FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name JAMES F. MCMENAMY		
Mirest Address 191 BRETTON WOODS DRIVE			Street Address 4 GLENDALE MIDDLE ROAD		
CRANSTON	State RI	^{Zip} 02920	Chy STOCKBRIDGE	Sittle MA	^{Ζφ} 01262
Secretary Name JOHN RUGGIERI			Treasurer Name JOHN RUGGIERI		
Street Address 191 BRETTON WOODS DRIVE			Street Address 191 BRETTON WOODS DRIVE		
CRANSTON	State RI	^{Zip} 02920	City CRANSTON	State RI	^{Zip} 02920
B. NAMES AND ADDRESSE Director Name JOHN RUGGIERI	S OF THE DIR	ECTORS: ("X" BOX FOR ATT	ACHMENT) [7] FILL IN S Director Name NICOLE RUGGIERI		ATTACHMENTS
Street Address 191 BRETTON WOODS DRIVE			Street Address 39 BEECHWOOD DRIVE		
CRANSTON	State RI	<i>Zip</i> 02920	CRANSTON	State RI	<i>Στρ</i> 01921
Director Name PETER ROTELLI ESQ.			Director Name JAMES F. MCMENA	MY	
Street Address 26 BRIDGHAM FARM ROAD			Street Address 4 GLENDALE MIDDLE ROAD		
City EAST PROVIDENCE	State RI	^{Zip} 02916	STOCKBRIDGE	State MA	^{Zip} 01262
SHARES AUTHORIZED		,	10. SHARES ISSUED (ISSUED SHARES THIS SECT	("X" BOX FOR ATTACH TION MUST BE COMPLETED	MENT)
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	Class/Series	Par Value
			100,000	COMMON CLA	SS \$1.00 PAR
mstruction sheet.					

	11 1 2 Construct this warrest
	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
1 11 00	contained herein my true and correct.
Tile Date / 1/60/9	John Ruggier 1/13/09
012/	Signature Date
Theck No	John RUGGIERI
(mnc)	Print or Type Name
	PRESLOGYIT
FOR SECRETARY OF STATE USE ONLY	Title Form 630 Rev. 08/08



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1. Corporate ID No. 3302	2. Name of Corporation CPI CONTROLS	SINC.			
3. Street Address Principal Business Office 29 MENDON AVENUE			PÁWTUCKET	State RI	21p 02861
4. Business Phone No. 5. State of Incorporation (401) 722-5900 RI					
6. Brief Description of the Character INDUSTRIAL DISTRIBUTO	OR OF PIPE AND VA	LVE SYSTEMS			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name PAGE 2 CONTINUATION OF OFFICERS & DIRECTORS			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name NICOLE RUGGIERI LEHOURITES		
Street Address			Street Address 39 BEECHWOOD DRIVE		
City	State	Zβp	CRANSTON	State RI	^{Ζφ} 02921
Secretary Name			Treasurer Name		
Street Address		- 1000-100 c)	Street Address		
City	State	Zip	СПу	State	Zip
8. NAMES AND ADDRESSES Director Name RICHARD REILAND	S OF THE DIRECTOR	S; ("X" BOX FOR ATT	ACHMENT)	SPACES BEFORE USING AT	TACHMENTS
Street Address 3 TREASURE WAY			Street Address 1390 PARK STREET		
City: ASHLAND	State MA	<i>Zi</i> φ 01721	ATTLEBORO	State MA	<i>хір</i> 02702
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			Number of Shares	Class/Series	Pav Value
State. Changes require an additional filing. See Section 9 of instruction sheet.			100,000	COMMON CLASS	\$1.00 PAR
This report must be executed this report must be executed				orporation is in the hands of a	a 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
File Date 1-16-09	contained begein are true and correct. Signature Contained begein are true and correct. Date 1/13/09
Theck No	Print or Type Name Ruggiesi
FOR SECRETARY OF STATE USE ONLY #2	Title Form 630 Rev. 08/08