



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. 144199		2. Name of Corporation STEVEN BEAUVAIS FINANCIAL CONSULTANT, INC.			
3. Street Address Principal Business Office 8 Karen Ann Drive			City Smithfield	State RI	Zip 02917
4. Business Phone No. 578-2002		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS A FINANCIAL CONSULTANT AND AS A CONSULTANT TO ALL TYPES OF BUSINESS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Steven J. Beauvais			Vice President Name Steven J. Beauvais		
Street Address 8 Karen Ann Drive			Street Address 8 Karen Ann Drive		
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
Secretary Name Steven J. Beauvais			Treasurer Name Steven J. Beauvais		
Street Address 8 Karen Ann Drive			Street Address 8 Karen Ann Drive		
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Steven J. Beauvais			Director Name		
Street Address 8 Karen Ann Drive			Street Address		
City Smithfield	State RI	Zip 02917	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"/> AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	\$1.00 PAR VALUE		1,000	\$1.00 PAR VALUE	

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.

File Date FILED
Check No. JAN 28 2009
By: By [Signature]
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 statements, and that all statements contained herein are true and correct.

[Signature]
Signature _____ Date _____
Steven J. Beauvais
Print or Type Name
President
Title