

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

Form 630 Rev. 08/08

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(ecc'd)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 115121	2. Name of Corporation Allied Engineering, Inc.					
3. Street Address Principal Business Office 160 Veranda Street			City Portland	State Maine	<i>Ζi</i> ρ <b>04103</b>	
4. Business Phone No. 5. State of Incorporation 207-221-2260 Maine						
6. Brief Description of the Character of MCCIICNCC 7. NAMES AND ADDRESSES	al & 616	INICAL LE		NSINEERING AT	TTACHMENTS	
President Name Catherine A. Faucher			Vice President Name	,		
Street Address 160 Veranda Street			Sirvet Address			
City Portland	State Maine	<sup>Zip</sup> 04103	City	State	Zip	
Secretary Name			Treasurer Name Beverly A. Battle			
Street Address			Street Address 160 Veranda Street			
City'	State	Zip	Cuy Portland	State Maine	<sup>Zip</sup> 04103	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT. Director Name Catherine A. Faucher			ACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS  Director Name			
Street Address 160 Veranda Street			Street Address		23	
City Portland	State Maine	Zip 04103	City	State	Zip	
Director Name			Director Name		29	
Street Address			Street Address			
City	State	Ζψ	Сйу	State	Zip <b>9:</b> 1	
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	Class/Series	Par Value	
			55		No Par	
			<b>工程的</b> 在1476			
This report must be executed this report must be executed	on behalf of the corpon behalf of the corpo	ooration by an authorize oration by the receiver o	or trustee.  Under penalty of	perjury, I declare and affirm tha	at I have examined this report,	
File Daie FILED				companying schedules and state are true and correct.	Date	
Check No. JAN 2 9 200	9		Catherine A. Faucher			
By: By 10 33	0	_		Print or Type Name  President		
FOR SECRETARY OF STA	ATE USE ONLY			Title		