



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. 83346		2. Name of Corporation MCD AIR TRANSPORT, INC.			
3. Street Address Principal Business Office 25 North Crow Point Road			City Lincoln	State RI	Zip 02865
4. Business Phone No. 401-724-5300		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL GOODS AND COMMODITIES TRANSPORTATION, BY FREIGHT					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Olivia M. Marcello			Vice President Name Julian M. Marcello, Jr.		
Street Address 1536 Scituate Avenue			Street Address 25 North Crow Point Road		
City Cranston	State RI	Zip 02921	City Lincoln	State RI	Zip 02865
Secretary Name Julian M. Marcello, Jr.			Treasurer Name Julian M. Marcello, Jr.		
Street Address 25 North Crow Point Road			Street Address 25 North Crow Point Road		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Olivia M. Marcello			Director Name None		
Street Address 1536 Scituate Avenue			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION <b>MUST</b> BE COMPLETED		
			Number of Shares 1000	Class/Series Common	Par Value \$10
			THIS SECTION <b>MUST</b> 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.

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 Date 1/22/09

Olivia M. Marcello

Print or Type Name

President

Title

<b>FILED</b>	
File Date	JAN 30 2009
Check No.	
By	By 25701
FOR SECRETARY OF STATE USE ONLY	