

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. 22128		neering Co., Inc.			
3. Street Address Principal Business Office 155 South Main Street			Providence	State RI	02903
i. Business Phone No. 401-454-1900 5. State of Incorporation Rhode Island				•	
 Brief Description of the Ch Installation of heating 					
	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA	· —	SPACES BEFORE USING	ATTACHMENTS
President Name Antonio R. Freitas			Vice President Name Antonio R. Freitas		
Street Address			Street Address		
945 Westminster Street			945 Westminster Street		
ाए Providence	State RI	02903	Providence	State RI	^{Zip} 02903
Secretary Name Antonio R. Freitas			Treasurer Name Antonio R. Freitas		
Street Address 945 Westminster Street			Street Address 945 Westminster Street		
сиу Providence	State RI	^{Zip} 02903	City Providence	State RI	^{Zψ} 02903
8. NAMES AND ADDR Director Name	ESSES OF THE DIRE	CTORS: ("X" BOX FOR ATT	. —	IN SPACES BEFORE USIN	G ATTACHMENTS
Antonio R. Freitas			Director Name		
Street Address			Street Address		
945 Westminster St				· · · · · · · · · · · · · · · · · · ·	
city Providence	State RI	^{Zip} 02903	City	State	Zip
Director Name		102300	Director Name		
			<u>:</u>		
Treet Address			Street Address		
СЦу	State	Zip	City	State	Zip
9. SHARES AUTHORIZ	ZED	I		I D <i>("X" BOX FOR ATTAC</i> SECTION <u>MUST</u> 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
			200	Common	No Par Value
		ne corporation by an authorize		corporation is in the hand	ls of a receiver or trustee
		e corporation by the receiver			
			IIi i c	· • • • • • • • • • • • • • • • • • • •	
				perjury, I declare and affirm companying schedules and st	
1	1 19		contained herein	are true and correct.	4-
File Date	-6-07			uc 4 2	112 2 .2
Check No.	22513		Signature		Date
	mno	, ,	Antonio R.		
By:			Print or Type Name PRESIDENT		
FOR SECRETAR	Y OF STATE USE ONLY			<u> </u>	
			Title		Form 630 Rev. 08/08