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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.	2. Name of Corporation		
331	ACME CONCRETE FORM CO., INC.		
3. Street Address Principal Business Office	City	State	Zip
11 Joy Street	Johnston	RI	02919-0000
4. Business Phone No.	5. State of Incorporation		
(401) 942-1843	RI		
6. Brief Description of the Character of Business Conducted in Rhode Island			
foundation contractor			

7. NAMES AND ADDRESSES OF THE OFFICERS. ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	City	State	Zip
Paul L. Carbone	Cranston	RI	02921-
Street Address			
88 Alpine Estates Drive			

Vice President Name	City	State	Zip
Ellen Carbone	Cranston	RI	02921-
Street Address			
88 Alpine Estates Drive			

Secretary Name	City	State	Zip
Ellen Carbone	Cranston	RI	02921-
Street Address			
88 Alpine Estates Drive			

Treasurer Name	City	State	Zip
Paul L. Carbone	Cranston	RI	02921-
Street Address			
88 Alpine Estates Drive			

8. NAMES AND ADDRESSES OF THE DIRECTORS. ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	City	State	Zip
none	none	none	none
Street Address			
none			

Director Name	City	State	Zip
none	none	none	none
Street Address			
none			

Director Name	City	State	Zip
none	none	none	none
Street Address			
none			

Director Name	City	State	Zip
none	none	none	none
Street Address			
none			

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
300	Common	No Par
THIS SECTION MUST 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.

[redacted] [redacted]

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.

Paul L. Carbone — 01/05/09
Signature *Date*

Paul L. Carbone
Print or Type Name

President
Title

[redacted]

File Date FILED
Check No. FEB 11 2009
By: By 8196
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Form 630 Rev. 08/08