

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(cctd)) is white to comply for \$5.25.00

subject to a penalty fee of \$25.00.					
I. Corporate ID No. 131454	2. Name of Corporation South County Design Group, Inc.				
3. Street Address Principal Business Office 375 Oakwood Drive			েণ্ড Wakefield	State RI	^{Zip} 02879
4. Business Phone No.		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Engineering	of Business Conducted i	n Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Kenneth Hayes			CHMENT) THILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Kenneth Hayes		
Street Address 375 Oakwood Drive			Street Address 375 Oakwood Drive		
City Wakefield	State RI	^{Zip} 02879	City Wakefield	State RI	^{Zip} 02879
Secretary Name Kenneth Hayes			Treasurer Name Kenneth Hayes		
Street Address 375 Oakwood Drive			Street Address 375 Oakwood Drive		
City Wakefield	State RI	^{Zip} 02879	City Wakefield	State RI	2 ² 02879 3 3 3 3 3 3 3 3 3
8. NAMES AND ADDRESSES Director Name Kenneth Hayes	OF THE DIRECTO	ORS: ("X" BOX FOR ATT	ACHMENT) FILL IN SPA Director Name	CES BEFORE USING	ATTACHMENTS S
Street Address 375 Oakwood Drive			Street Address		
Cuy Wakefield	State RI	<i>z</i> φ 02879	City	State	Zip
Errector Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X ISSUED SHARES — THIS SECTION	A A A A A A A A A A A A A A A A A A A	ŒNT)
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
			100	Common	No Par
This report must be executed this report must be executed of				ration is in the hands o	f a receiver or trustee,

File Date FILED	
Check No FEB 1 2 2009	
By: By 626	
FOR SECRETARY OF STAT	E USE ONLY

Under penalty of perjury, I declare and af	
including any accompanying schedules a	nd statements, and that all statements
contained herein are true and correct.	- 4/-2
1 Kuth St	n = 2/6/01
Signature	Date
Kenneth Hayes	
Print or Type Name	
President	
Title	