RI SOS Filing Number: 200942215900 Date: 02/12/2009 4:00 PM

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(c), 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			
000129019	COUTO DIVERSIFIED SERVICES, Inc			
3. Street Address Principal Business Office		City	State	Zip
73 Karen Street		Attleboro	MA	02703
4. Business Phone No.	5. State of Incorporation			
508-455-0369	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Firewood Production (wholesale + logging/landscaping)

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

President Name			Vice President Name		
Joseph R. Couto			Joseph R. Couto		
Street Address			Street Address		
73 Karen Street			73 Karen Street		
City	State	Zip	City	State	Zip
Attleboro	MA	02703	Attleboro	MA	02703
Secretary Name			Treasurer Name		
Joseph R Couto			Joseph R. Couto		
Street Address			Street Address		
73 Karen Street			73 Karen Street		
City	State	Zip	City	State	Zip
Attleboro	MA	02703	Attleboro	MA	02703

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

Director Name			Director Name		
JOSEPH R COUTO			JOSEPH R. COUTO		
Street Address			Street Address		
↑ (SAME) ↑			↑ (SAME) ↑		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED
100 NO PAR

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
100	NO	PAR

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.

Joseph R Couto 2/9/09
Signature *Date*

Joseph R Couto
Print or Type Name

Sole Proprietor/Owner
Title

File Date
FILED
Check No.
FEB 12 2009
By
FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 630 Rev. 08/08

30797-14-346851