

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 within the condition of the composition of th subject to a penalty fee of \$25.00.

					
1. Corporate ID No. 6358	2. Name of Corporation SALVATORE SACCOCCIO & ASSOCIATES, INC.				
3. Street Address Principal Business Office 1085 Park Avenue			Cay Cranston	State RI	^{Zip} 02910
		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Architectural Firm	of Business Conducted in R	bode Island			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) 🔲 FILL IN SPACE	S BEFORE USING	ATTACHMENTS
President Name			Vice President Name		
Mark Saccoccio			Steve Guglielmo		
Street Address 1085 Park Avenue			Street Address 1085 Park Avenue		
Cuy Cranston	State RI	^{ℤψ} 02910	City Cranston	State RI	<i>z</i> ∌ 02910
Secretary Name Mark Saccoccio			Treasurer Name Mark Saccoccio		
Street Address 1085 Park Avenue			Street Address 1085 Park Avenue		
City Cranston	State RI	^{Zip} 02910	City Cranston	State RI	^{Zψ} 02910
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR AT	<i>(ÂCHMBNT</i>) 🔲 FILL IN SPAC	ES BEFORE USING	ATTACHMENTS
Director Name			Director Name		
Mark Saccoccio			Steve Guglielmo		
Street Address			Street Address		
1085 Park Avenue			1085 Park Avenue		
Chy	State	Ζψ	Chy	State	Zψ
Cranston	RI	02910	Cranston	RI	09210
Director Name			Director Name		
			<u>•</u>		
Street Address			Street Address		
Cuy	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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
			1,000	common-A	\$1.00
			10,000	common-B	\$0.10
This report must be executed	on behalf of the corp	oration by an authorize	ed representative. If the corpora	tion is in the hands	of a receiver or trustee.
this report must be executed					
			Under negative of periors	I declare and affirm the	nat I have examined this report
					tements, and that all statement
File Date SI CO			contained herein are true and correct.		
Check No. FFR 17 7			Mark Saccocc	io	