RI SOS Filing Number: 200942382080 Date: 02/17/2009 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(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
6619	MAJOR ELECTRIC & SUPPLY, INC.

3. Street Address Principal Business Office	City	State	Zip
123 HIGH STREET	PAWTUCKET	RI	02860

4. Business Phone No.	5. State of Incorporation
401-724-7100	RHODE ISLAND

6. Brief Description of the Character of Business Conducted in Rhode Island
ELECTRICAL EQUIPMENT AND SUPPLIES

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

President Name	Street Address	City	State	Zip
ALAN J. LEVEN	41 GALEN COURT	SEEKONK	MA	02771

Vice President Name	Street Address	City	State	Zip
MYRNA R. LEVEN	3221 BURGUNDY DRIVE NORTH	PALM BEACH GARDEN	FL	33410

Secretary Name	Street Address	City	State	Zip
ALAN J. LEVEN	41 GALEN COURT	SEEKONK	MA	02771

Treasurer Name	Street Address	City	State	Zip
DAVID E. LEVEN	3221 BURGUNDY DRIVE NORTH	PALM BEACH GARDEN	FL	33410

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

Director Name	Street Address	City	State	Zip
DAVID E. LEVEN	3221 BURGUNDLY DRIVE NORTH	PALM BEACH GARDEN	FL	33410
MYRNA R. LEVEN	3221 BURGUNDY DRIVE NORTH	PALM BEACH GARDEN	FL	33410

Director Name	Street Address	City	State	Zip
ALAN J. LEVEN	41 GALEN COURT	SEEKONK	MA	02771

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
5000	COMMON	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]

FILED
File Date FEB 17 2009
Check No. By 10,311
By:
FOR SECRETARY OF STATE USE ONLY

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.

[redacted] 1-26-09
Signature *Date*

ALAN J. LEVEN
Print or Type Name

[redacted] PRESIDENT
Title

31239-23-347065

Form 630 Rev. 08/08