

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 falling 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. 164297		2. Name of Corporation Piacentini Corporation				
3. Street Address Principal Business Office 107 Beach Road			City Bristol	State RI	^{Zip} 02809	
4. Business Phone No. 5. State of Incorporat 401-694-1218 Rhode Island			ion			
Marketing consulta	Character of Business Conduct nt for real estate develo	pment				
7. NAMES AND ADD	PRESSES OF THE OFFIC	ERS: ("X" BOX FOR A	TTACHMENT) 🔲 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
President Name	:		Vice President Name			
Vero P. Piacentin	<u></u>		Vero P. Piacentini			
Street Address 107 Beach Road	T		Street Address 107 Beach Road			
City Bristol	State RI	^{Zip} 02809	City Bristol	State RI	<i>Zұр</i> 02809	
Secretary Name Vero P. Piacentini			Treasurer Name Vero P. Piacentini			
Street Address 107 Beach Road			Street Address 107 Beach Road			
City Bristol	State RI	Zip 02809	Ctty Bristol	State RI	<i>Ζφ</i> 02809	
8. NAMES AND ADD Director Name Vero P. Piacentin		CTORS: ("X" BOX FOR	ATTACHMENT) FILL II Director Name	N SPACES BEFORE USING		
Street Address 107 Beach Road			Street Address			
City	State	Zip	City	State	Zip	
Bristol	RI	02808		,		
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сну	State	Zip	
AUTHORIZED SHARES	IZED ("X" BOX FOR A	TTACHMENT)		 <i>("X" BOX FOR ATTACH</i> CTION <u>MUST</u> BE COMPLETED	 'MENT) []	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
2,000 COMMON NO PAR VALUE			0	COMMON	NO PAR	
This report must be e	recuted on behalf of the	corneration by an author	orized representative. If the o	composition is in the bands	<u> </u>	

FILED	
FEB 1 7 2009	
Check No. By 1987	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and a	ffirm that I have examined this report
including any accompanying schedules a	and statements, and that all statements
contained herein are true and correct.	
	2-10-09
Signature	Date
Vero P. Piacentini	

Vero P. Piacentini
Print or Type Name

President

Title