

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 subject to a penalty fee of \$25.00.	1501(e), each corporation f	ailing or refusing to file its ann	ual report within thirty (30) da	ys after the time prescribed by lau	(R.I.G.L. /-1.2-1501(cod)) is
I. Corporate ID No. 14542 6	2. Name of Corporation LOURENCO CC	NSTRUCTION, INC	,		
3. Street Address Principal Business Office 30 RIDGE STREET			CRANSTON	State RI	^{Zip} 02920
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character TO INSTALL, REPAIR DRY	WALL, PLASTER, 1	TILE WORK, & PAINT			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name CARLOS A. LOURENCO			Vice President Name CARLOS A. LOURENCO		
Street Address 30 RIDGE STREET			Street Address 30 RIDGE STREET		
CRANSTON	State RI	^{Zip} 02920	City CRANSTON	State RI	^{Zip} 02920
Secretary Name EMILIA C. LOURENCO			Treasurer Name CARLOS A. LOURENCO		
Street Address 30 RIDGE STREET			Street Address 30 RIDGE STREET		
CRANSTON	State RI	Zip	City CRANSTON	State RI	^{Zip} 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name CARLOS A. LOURENCO			TACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name EMILIA C. LOURENCO		
Street Address 30 RIDGE STREET			Street Address 30 RIDGE STREET		
City CRANSTON	State RI	<i>Ζιρ</i> 02920	City CRANSTON	State RI	02920
Director Name NONE			NONE J E		
Street Address			Street Address		
City	State	Zip	City	State	Zip 02
9. SHARES AUTHORIZED	•	'		("X" BOX FOR ATTACE CTION 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
			200	COMMON	NO PAR VALUE
This report must be executed this report must be executed				corporation is in the hands	of a receiver or trustec,
			Under penalty of p	perjury, I declare and affirm the	hat I have examined this repor

	Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements
File Date 2-17-09	contained herein are true and correct. - Baller D Lowence 2 15.09
Check No	Signature Date CARLOS A. LOURENCO
By:	Print or Type Name PRESIDENT
FOR SECRETARY OF STATE USE ONLY	Title Form 630 Rev. 08/08