RI SOS Filing Number: 200942594140 Date: 02/19/2009 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		
116317	Mahoney's Scrap Metal Inc.		
3. Street Address Principal Business Office	City	State	Zip
300 Front Street	Lincoln	RI	02865
4. Business Phone No	5. State of Incorporation		
(401) 725-8359	Rhode Island		

6. Brief Description of the Character of Business Conducted in Rhode Island
SALE OF SCRAP METAL

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

President Name	Vice President Name
Alexander F. Davidow	Darrel Davidow
Street Address: 506 Newman Avenue	Street Address: 19 Amber lane
City: Seekonk, State: MA, Zip: 02771	City: Attleboro, State: MA, Zip: 02703
Secretary Name: Bettly L. Davidow	Treasurer Name: Bettly L. Davidow
Street Address: 506 Newman Avenue	Street Address: 506 Newman Avenue
City: Seekonk, State: MA, Zip: 02771	City: Seekonk, State: MA, Zip: 02771

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

Director Name	Director Name
Alexander F. Davidow	Bettly L. Davidow
Street Address: 506 Newman Avenue	Street Address: 506 Newman Avenue
City: Seekonk, State: MA, Zip: 02771	City: Seekonk, State: MA, Zip: 02771
Director Name	Director Name
Street Address	Street Address
City, State, Zip	City, State, Zip

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
2000	COMMON	NO PAR VALUE

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]

FILED

File Date FEB 19 2009

Check No. By 3076

By:

FOR SECRETARY OF STATE USE ONLY

31291-15-348923

[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.

Signature 2-17-09 *Date*

Alexander F. Davidow
Print or Type Name

[redacted] President
Title

Form 630 Rev. 08/08