

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

401.222.30

Filling Period: January 1 - March 1 • Filling 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(c), 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. 86416	2. Name of Corporation Advanced Communication Technologies				
3. Street Address Principal Business Office 599 Kingston Road			City Wakefield	State RI	^{Zip} 02879
4. Business Phone No. 5. State of Incorporation Rhode Island					
6. Brief Description of the Character of To conduct retail sales and s	of Business Conducted in R services of cellular p	hode Island hones.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Donald L. Somers			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Donald L. Somers		
Street Address 19 599 Kingston Road			Street Address 1 599 Kingston Road		
City Wakefield	State RI	^{ziji} 02879	City Wakefield	State RI	^{Ζφ} 02879
Secretary Name Donald L. Somers			Treasurer Name Donald L. Somers		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Donald L. Somers			FILL IN SPACES BEFORE USING ATTACHMENTS Director Name		
Street Address same as above			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
Сиу	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	Cluss/Series	Par Vaiue
			8,000	\$1.00	Par Value
			4,000	Common	1.00
This report must be executed of this report must be executed of	on behalf of the corpo	oration by an authorize ration by the receiver o	or trustee. Voder penalty of pe	rjury, v declare a nd affirm t	that I have examined this report
File Date Check No. By: FOR SECRETARY OF STATE FILED FEB 19 200	6		Signature Donald L. So Print or Type Name President Title	unit and confect.	pate
					Form 630 Rev. 08/08