

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(ce'rd)) is whiter to a penalty fee of \$25.00

subject to a penalty fee of \$25.00.					
1. Corporate ID No	2. Name of Corporation	m <u>T</u>	NC.		
159291	Tiberio	Construction Co			
3. Street Address Principal Busine	ess Office		City	State	Ziji
225 Pine Swam	p Road		Cumberland	RI	02864
4. Business Phone No.		5. State of Incorporation			
401 -831-6597 🥃	33-0311	Rhode Isla	ınd		
6. Brief Description of the Charac	ter of Business Conducted in	Rhode Island		· · · · · · · · · · · · · · · · · · ·	
7. NAMES AND ADDRESS	SES OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) 📋 FILL IN SP.	ACES BEFORE USING	G ATTACHMENTS
President Name			Vice President Name		
Lucas A. Tiberio Street Address			Lucas A. Tiberio Street Address		
City	State	Zip	City	State	Zip
Cumberland	RI	02864	Cumberland	RI	02864
Secretary Name	······		Treasurer Name		92004
Lucas A. Tiberio			Lucas A. Tiberio		
Street Address			: Street Address		
225 Pine Swamp Road			225 Pine Swamp Road		
City	State	Zip	City	State	Zip
Cumberland	,	02864	; '	1	
8. NAMES AND ADDRESS	RI ES OF THE DIRECTO	1	: Cumberland FACHMENT) [] FILL IN S	RI SPACES BEFORE USI	02864
Director Name			Director Name	TACES DEFORE USI.	NG ATTACHMENTS
None					
Street Address		·	Street Address		
					·
City	State	Zip	Cily	State	Zip
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Director Name		J	Director Name		
(SITECHA MITTE		•	Thrector Name	•	
Street Address					
SIVEEL PRINTESS			Street Address		
City	State	Zip	City	State	Two
~~,	J. D. D. L.	124	City	Suite	Zip
9. SHARES AUTHORIZED		1	10 CHARGE ICCUED ("Y" BOY FOR ATTA	OFFICE PARTY
). SHARLS ACTHORIZED	1000 no par v	alue	10. SHARES ISSUED		
			ISSUED SHARES THIS SECT		·
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
			None		
			None		
•					+
This report must be execut	ted on behalf of the co	rporation by an authorize	d representative. If the cor	poration is in the han	ds of a receiver or trustee,
this report must be execute	ed on behalf of the cor	poration by the receiver of	or trustee.		
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					that I have examined this repo
	<u> </u>	7	contained herein are		tatements, and that all stateme
File Date 2-23-09			· ·	The and confeder	2/17/04
					/1/0/
21	(Signature		Da i e '
By:			Lucas A. Tiberio		
			Print or Type Name		
			President		
			Title		m
					Form 630 Rev. 08/08