



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-261
401.222.304

ROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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
R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

Corporate ID No. 3902	2. Name of Corporation CENTRAL SHEET METAL, INC.			
Street Address Principal Business Office 560 Mineral Spring Avenue		City Pawtucket	State Rhode Island	Zip 02860
Business Phone No. 1-401-723-0325		5. State of Incorporation RHODE ISLAND		

Brief Description of the Character of Business Conducted in Rhode Island
SHEET METAL FABRICATION

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

President Name Barbara A. Bergeron			Vice President Name Bruce R. Bergeron		
Street Address 187 Park Circle			Street Address 175 Park Circle		
City So. Attleboro	State Mass.	Zip 02703	City So. Attleboro	State Mass.	Zip 02703
Secretary Name Bruce R. Bergeron			Treasurer Name Barbara A. Bergeron		
Street Address 175 Park Circle			Street Address 187 Park Circle		
City So. Attleboro	State Mass.	Zip 02703	City So. Attleboro	State Mass.	Zip 02703

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

Director Name Barbara A. Bergeron			Director Name Bruce R. Bergeron		
Street Address 187 Park Circle			Street Address 175 Park Circle		
City So. Attleboro	State Mass.	Zip 02703	City So. Attleboro	State Mass.	Zip 02703
Director Name None			Director Name None		
Street Address			Street Address		

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 COMM NO PAR VALUE			50	Common	None

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

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.

FILED

File Date **FEB 25 2000**
Check No. **BV 11555**
By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Barbara Ann Bergeron 2-22-00
Signature _____ Date _____

Barbara A. Bergeron

Print or Type Name

President/Treasurer

Title