

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 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(cdrd)) is

subject to a penalty fee of \$25.00.				• •	(ma) (R.1.G.L. /-1.2-1501(cord)
1. Corporate ID No. 164196	2. Name of Corpora Envirosense,	tion Inc.			
3. Street Address Principal Business Office 35 Tanglewood Trail			City Narragansett	State RI	Zip 02882
4. Business Phone No. 5. State of Incorporation (401) 855-1010 Rhode Island					02002
6. Brief Description of the Character Construction supplies	of Business Conducted	in Rhode Island			
7. NAMES AND ADDRESSES President Name	S OF THE OFFICE	RS: ("X" BOX FOR ATT	ACHMENT)   FILL IN S	SPACES BEFORE USIN	G ATTACHMENTS
John McNamara			Vice President Name None		
Street Address 35 Tanglewood Trail			Street Address		
City Narragansett	State RI	<sup>Zip</sup> 02882	City	State	Zip
Secretary Name John McNamara			Treasurer Name John McNamara		
Street Address 35 Tanglewood Trail			Street Address 35 Tanglewood Trail		
<i>сиу</i> Narragansett	State RI	<sup>Zip</sup> 02882	City Narragansett	State	Zip 02882
3. NAMES AND ADDRESSES  Director Name  John McNamara	OF THE DIRECTO	ORS: ("X" BOX FOR AT	TACHMENT)   FILL IN Director Name	SPACES BEFORE USII	NG ATTACHMENTS
treet Address 5 Tanglewood Trail			Street Address		
City Narragansett  Director Name	State RI	<i>Ζι</i> ρ <b>02882</b>	City	State	Zip
			Director Name		
reet Address			Street Address		
ŭγ	State	Zip	City	State	Zip
. 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	Class/Series	Par Value
			100	common	no par value
his report must be executed of	on behalf of the con the behalf of the corp	rporation by an authorize poration by the receiver o	Under penalty of per	jury, I declare and affirm t	hat I have examined this repo
ile Date 3-5 e heck No. 3/2	-09		contained herein are	panying schedules and statue and correct.	tements, and that all statements
mnc			Print or Type Name		
FOR SECRETARY OF STATE USE ONLY			President Title		