

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence. RI 02904-2615

401.222,3040

2009

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- subject to a penalty fee of \$25.06		oration failing or refusing to file its an	nual report within thirty (30) days	after the time prescribed by law	v (R.I.G.L. 7-1,2-1501(දේශ්)) is .	
1. Corporate ID No. 41054		2. Name of Corporation Centrex Distributing, Inc.				
3. Street Address Principal Business Office 119 Hopkins Hill Road			West Greenwich	State RI	^{Zij} , 02817	
		5. Mate of Incorporation Rhode Island	он			
6 Brief Description of the Chara Warehousing, Distributi			1.7			
	SSES OF THE OFF	ICERS: ("X" BOX FOR ATTA	_	PACES BEFORE USING	ATTACHMENTS	
President Name Charles Fradin			Vice President Name Ken Mancini			
Street Address 119 Hopkins Hill Road			Street Address 119 Hopkins Hill Road			
West Greenwich	State RI	Ζφ 02817	West Greenwich	State RI	Ζψ 02817	
Secretary Name Raymond T. Mancini, Jr.			Treasurer Name Charles S. Fradin			
Street Address 119 Hopkins Hill Road			Street Address 119 Hopkins Hill Road			
City West Greenwich	State RI	^{Zip} 02817	City West Greenwich	State RI	^{Zip} 02817	
	SSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) [FILL IN :	SPACES BEFORE USING	G ATTACHMENTS	
Director Name			THEOLOF Same			
Street Address			Street Address			
CHy	State	Zip	Cuy	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
Сиу	State	Ziţ>	Сир	State	Ziţ	
9. SHARES AUTHORIZE	D		10 SHARES ISSUED	 ("X" BOX FOR ATTACE	HMENT) 🗆	
			188UED 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	
			200	COMMON	NO PAR	
This report must be exec	uted on behalf of	the corporation by an authoriz	ed representative. If the co	rporation is in the hands	s of a receiver or trustee.	
this report must be execu	ited on behalf of the	he corporation by the receiver	or trustee.			
			Under penalty of pe	riury. I declare and affirm t	that I have examined this report	
			including any accor	npanying schedules and sta	itements, and that all statemen	
FILE	D		contained herein are	true and correct.	211	
File Date			Jime G	told ha	21103	
Check No. MAR 0 6 2	009		Signature Priop A Co	Mman	Dair	
By 3263			Brian A. Goldman Print or Type Name			
By:	<u> </u>		- Total Or Type 19thine			

Assistant Secretary Form 630 Rev. 08/08

Centrex Distributors, Inc.

Corporate ID# 41054

Additional Officers:

Brian Goldman 681 Smith Street Providence, RI 02908 **Assistant Secretary**

Gerald E. Freeman 119 Hopkins Hill Road West Greenwich, RI 02817 **Assistant Secretary**

Gerald E. Freeman 119 Hopkins Hill Road West Greenwich, RI 02817

Assistant Treasurer

FILED

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By 41054