

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(cord)) is refused by a support within thirty (30).

subject to a penalty fee of \$25.0	00.		, , , , , , , , , , , , , , , , , , , ,	my sym ma ame proseriora of	ни (н.1.6.1., -1.2-1 энт(сога))	
1. Corporate ID No. 000105068	Coastal P	2. Name of Corporation Coastal Plumbing Service, Inc.				
3 Street Address Principal Business Office 21 Periwinkle Drive			City Wakefield	State RI	2ip 02879	
4 Business Phone No 5. State of Incorporation (401) 788-0355 Rhode Island					02010	
 Brief Description of the Char The operation of a plun 	nbing business off	ering plumbing installation, re	epairs and maintenance	e service.		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Glenn H. Anderson, Jr.			Vice President Name Vacant			
Street Address 21 Periwinkle Drive V	Vest		Street Address			
Ctry Wakefield	State R1	^{Ζιρ} 02879	City	State	Zip	
Secretary Name Tracy L. Anderson			Treasurer Name Glenn H. Anderson, Jr.			
Street Address 21 Periwinkle Drive West			Street Address 21 Periwinkle Drive West			
Warwick	State RI	λψ 02879	Сту Wakefield	State RI	^{Zip} 02879	
None	SSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) FILL I Director Name None	IN SPACES BEFORE USI	NG ATTACHMENTS	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name None			Director Name None			
Street Address			Street Address			
Cuy	State	Zip	Cuv	State	Zip	
9. SHARES AUTHORIZE	D '	· · · · · · · · · · · · · · · · · · ·	: 10. SHARES ISSUED ISSUED SHARES — THIS SI	 	CHMENT) [
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	
			50	Stk	\$0.00	
This report must be executhis report must be executhis	uted on behalf of the	ne corporation by an authorize	d representative. If the	corporation is in the hand	ds of a receiver or trustee,	

FILED				
File Date MAR 1 1 2009				
Check No. By 28				
Ву:				
FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I declare and affire	m that I have examined this report,
including any accompanying schedules and contained herein are true and correct.	statements, and that all statements $3/5/0.5$
Signature	Dine
Glenn H. Anderson, Jr.	
Print or Type Name	
President	
T.J.	