



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

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(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 101960		2. Name of Corporation EASTERN Building Services Corp			
3. Street Address Principal Business Office 900 Chelmsford St		City Lowell	State MA	Zip 01851	
4. Business Phone No. 978-441-1090		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gabriel J. Zizza			Vice President Name		
Street Address 900 Chelmsford St			Street Address		
City Lowell	State MA	Zip 01851	City	State	Zip
Secretary Name Gabriel J. Zizza			Treasurer Name Gabriel J. Zizza		
Street Address 900 Chelmsford St			Street Address 900 Chelmsford St		
City Lowell	State MA	Zip 01851	City Lowell	State MA	Zip 01851
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gabriel J. Zizza			Director Name		
Street Address 900 Chelmsford St			Street Address		
City Lowell	State MA	Zip 01851	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 12,500 Comm No PAR Value					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED					
Number of Shares 1,250		Class/Series Common		Par Value No PAR	
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.					

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.

File Date	<b>FILED</b>
Check No.	JUL 29 2009
By:	By 6843
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.

Signature: Gabriel J. Zizza Date: 7-16-09  
Print or Type Name: GABRIEL ZIZZA  
Title: President